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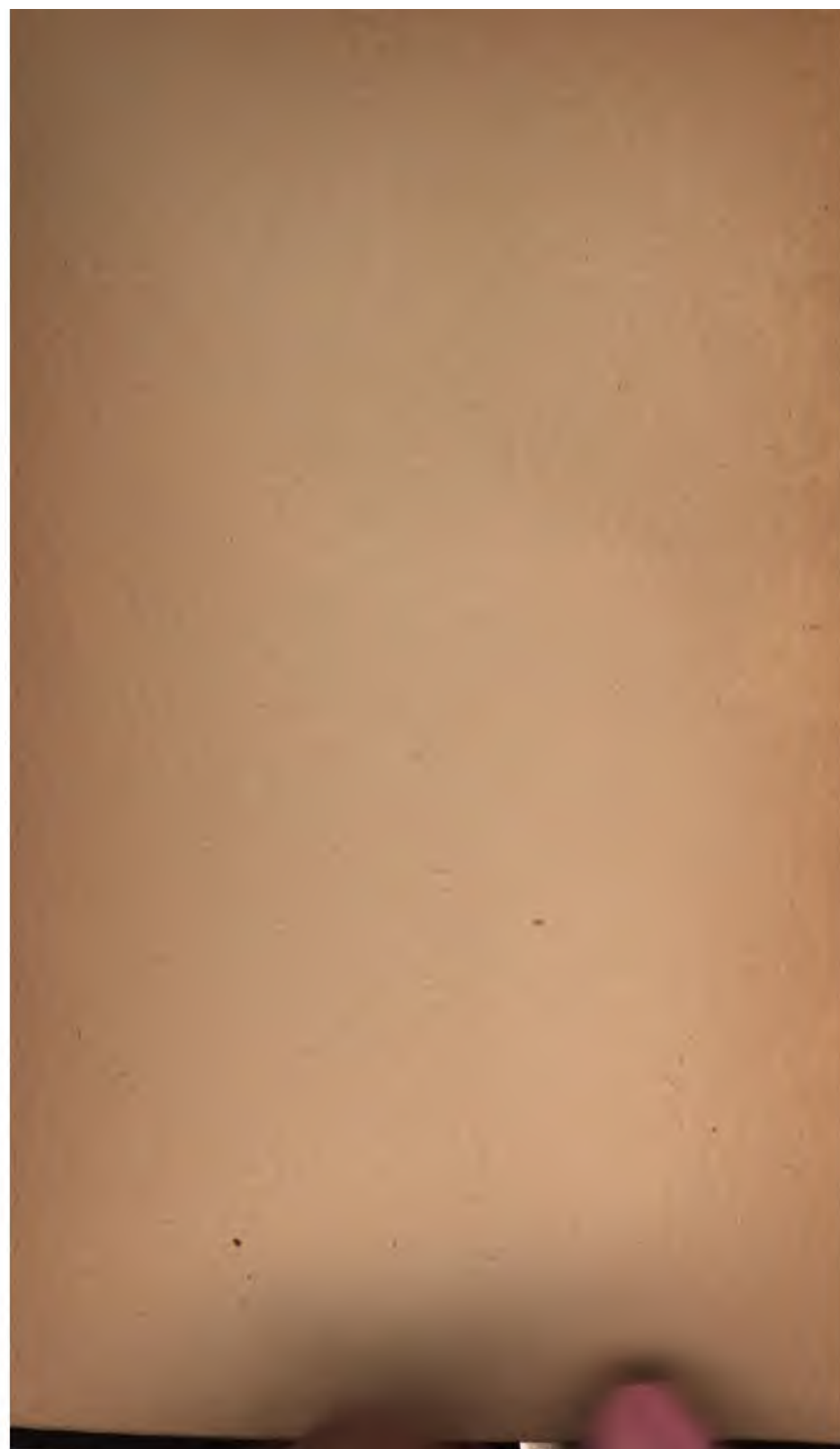


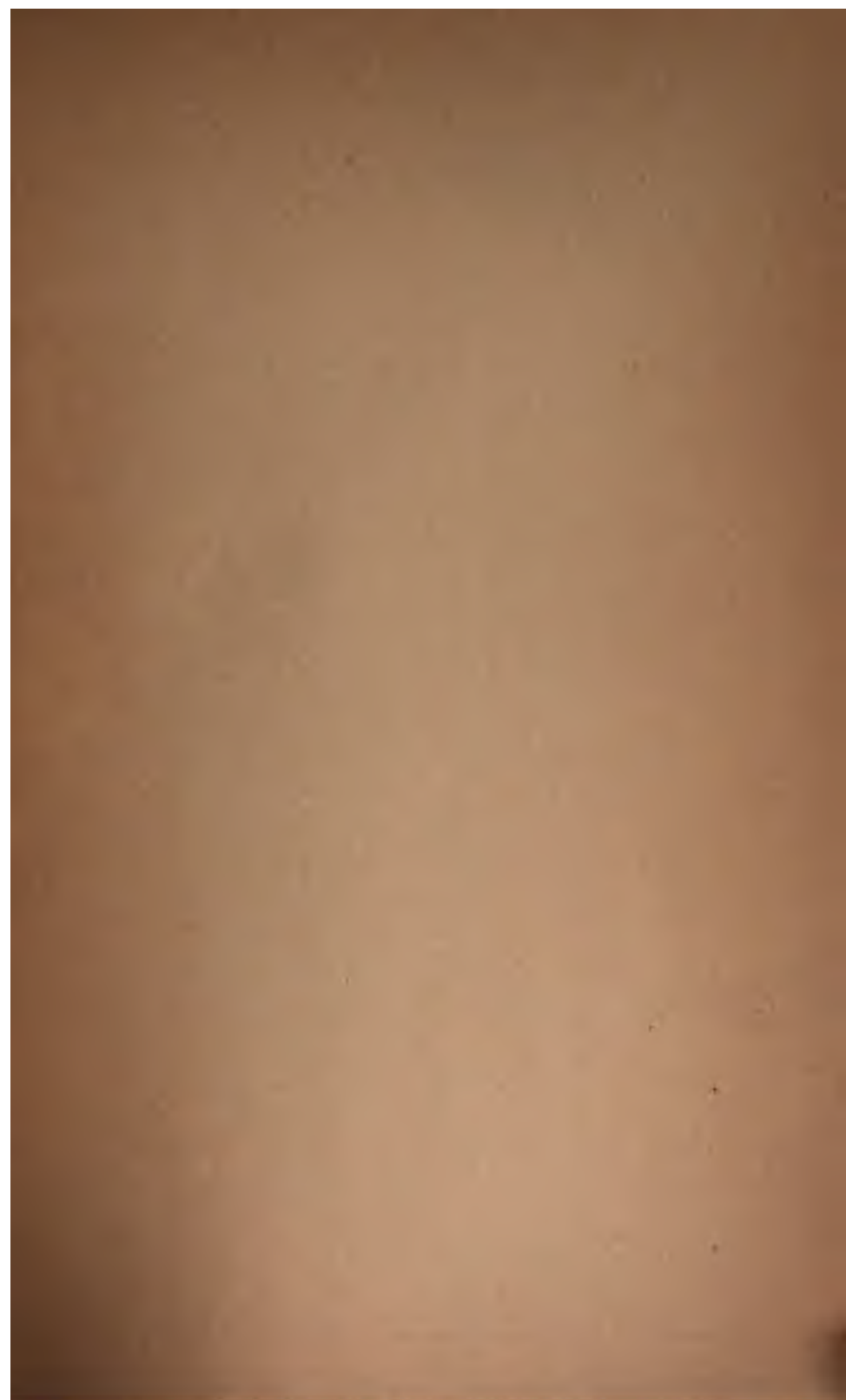
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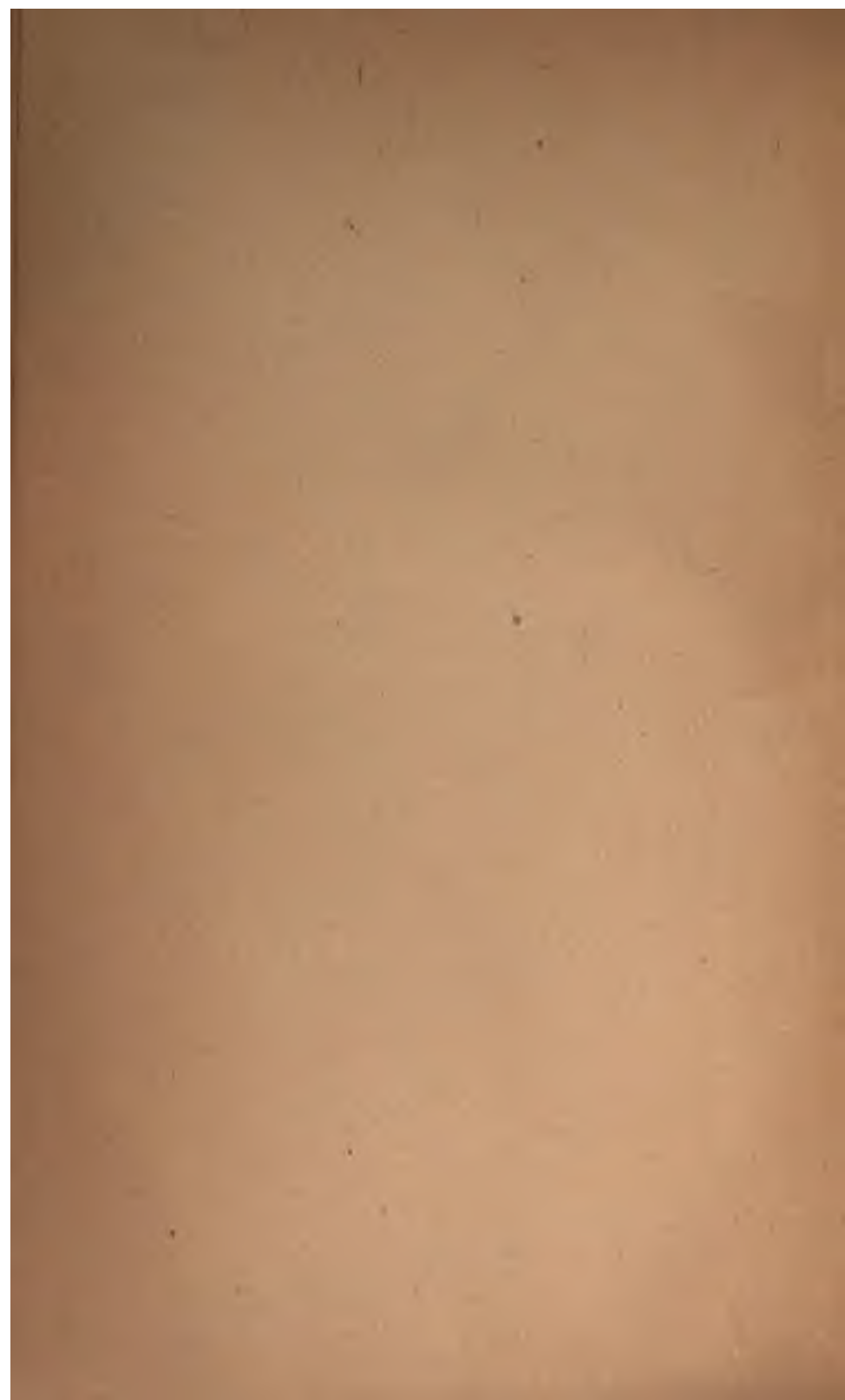
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# REMARKS

ON

# PUERPERAL FEVER

BEFORE THE  
LIBRARY

NEW YORK ACADEMY OF MEDICINE, OCTOBER 7, 1857.

BY

B. FORDYCE BARKER, M.D.,

PROFESSOR OF OBSTETRICS AND DISEASES OF WOMEN AND CHILDREN IN THE NEW YORK MEDICAL  
COLLEGE; PHYSICIAN TO BELLEVUE HOSPITAL; CONSULTING PHYSICIAN TO THE  
BLACKWELL'S ISLAND HOSPITAL.

(Phonographically reported by Dr. GEO. F. SHRADY, of the New York Hospital.)

FROM THE AMERICAN MEDICAL MONTHLY FOR NOVEMBER, 1857.

NEW YORK:  
EDWARD P. ALLEN, 9 SPRUCE STREET.

1857.

*J. R. M.*

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## REMARKS BY DR. BARKER.

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The regular meeting of this body was held October 7th, the President, Dr. VALENTINE MOTT, in the Chair. A continuation of the discussion on Puerperal Fever having been made, by previous vote of the Academy, the special order of this meeting, a large concourse of the Fellows was brought together.

Prof. Barker, being called upon by the President to continue the discussion, rose and said :

MR. PRESIDENT : I should feel some hesitation in offering a few remarks on puerperal fever, after the subject has been discussed for three evenings, by gentlemen whose character, position, and experience, carry with their expression of opinion the greatest weight and authority, were it not for the importance and difficulty of the subject, the opposite opinions which have been entertained by distinguished practitioners in regard to it, its liability to occur in the practice of every physician, and its terrible fatality. It is a disease which cannot be investigated by the study of a few sporadic cases, or of a single epidemic, or of different epidemics in the same locality. Neither is it a disease to be studied in the dead-house, for valuable as are the researches which have been made into the minute anatomy of this affection, important as it is, for the complete elucidation of the subject, that everything should be known as to the autopsic lesions which are to be found ; yet their variety in different epidemics, the absence of everything like constancy or uniformity in these autopsic lesions, the frequent want of everything like correspondence between the severity of the symptoms during life, and the amount of the morbid appearances found after death, prove, as I think, that these should be regarded as results of the disease, but not as the

disease. And it seems to me that there is some danger of our giving undue prominence to these autopsic lesions. We might as well seek to find out the cause of the fire, in a minute chemical and microscopical examination of the ashes of a conflagration, as rely upon the appearances found after death, to determine the character of a disease which results from the absorption of a morbid poison. But is this such a disease? That is the grand question; and it can be answered correctly, not by studying the disease from one stand-point alone, but by a comprehensive examination of all that has been found out as to its phenomena and laws, in different epidemics and varied localities, as recorded by different observers. Naturally enough, the opinions, especially the scientific opinions of men, have for a basis what they have seen and observed for themselves, and such opinions justly carry with them the most weight. Hence, in puerperal fever, we have had the finest minds and the brightest geniuses in medicine, as exponents of exclusive, special, restrictive views as to its pathology and its therapeutics, their ideas resting entirely on the peculiar type of the disease which they have seen for themselves. The character of this disease, bringing death and desolation into those families which have just exulted in the joy and gladness of a new birth, the medium of infection being sometimes the physician, whose steps are regarded, and should ever prove as those of a ministering angel of comfort and hope; its sudden onslaught, its speedy results, and its terrible fatality, all have combined to bring out the highest talent, where talent has before lain dormant in the ordinary routine of practice, and has contributed to give us a richer literature on this subject, than is to be found of any other disease. This statement will surprise some whose attention has not been specially called to this subject, but I believe it will bear close scrutiny. In this day of progressive medicine, in our anxiety to bring it up to the perfection of a physical science, it is possible that in our search after what is new and original, we may overlook what is old and proven, and thus that erroneous deductions may be drawn from the limited experience and observation of a few, which would have been corrected, had advantage been taken of the enlarged experience of the many. We have greatly the advantage of our predecessors in studying this disease. With all the acumen, and careful observation, and extensive experience of Gordon, and Armstrong, and Collins, and Gooch, and Ferguson, they had but a limited knowledge of its pathology and therapeutics, compared with what we may have, who can bring together the aggregate results of all their labors, without assuming to place ourselves



on the same intellectual level with them. What is puerperal fever? Is it a local phlegmasia? It was believed to be inflammation of the uterus by Mauriceau, Astruc, Denman, and others—to be inflammation of the omentum and intestines, by Hulme, Leake, and others. It was regarded as peritonitis by Gordon, Hey, Armstrong, Mackintosh, and Collins—to be inflammation of the veins and lymphatics, by Dance, Duplay, and others. Prof. Meigs, more comprehensive in his pathology than the authors I have named, considers puerperal fever as metritis, metrophlebitis, peritonitis, or ovaritis, or two or more of these phlegmasiæ combined. He distinctly avows as the object of his work, “to prove that it is a simple state of inflammation in certain tissues of pregnant women, and of women lately confined, and that the fever that attends it is a natural effect of intense constitutional irritation from the local disorders.”

In the discussion before the Academy, I think I am not wrong in asserting that we have had presented inferentially, if not directly, two entirely distinct, not to say opposite views, as to the essential character of this disease. Prof. Smith, in his very able and complete paper on its causes and modes of propagation, very plainly announces his belief that it is an idiopathic fever. In the interesting and valuable contributions to its morbid anatomy, made by my friend and colleague, Prof. Clark, although he has not definitely expressed his opinion as to the pathology of the disease, yet I think the legitimate deduction from what he has said must be, that it is a local phlegmasia. He says, “Puerperal fever has four principal lesions, and many of a secondary character; inflammation of the peritoneum, inflammation of the veins of the body of the uterus, inflammation of the inner surface of the uterus, or endo-metritis.” He expresses his belief that, in every case, one of these lesions will be found. He distinctly asserts that these lesions are inflammatory. He also states his conviction, “that those cases described by Gooch, Locock, Simpson, and others, as without lesion, were cases of pyæmia, and that the pyæmia has its source in the inflammation of the inner surface of the uterus, and the facility with which the uterine sinuses could convey the pus into the system was shown.”

Without stopping at the present moment to discuss the question, whether pus, the product of simple ordinary inflammation, if absorbed or washed into the circulating blood, will produce the symptoms which we call pyæmia, or whether, in fact, another element besides laudable pus is not essential for the production of these phenomena, it is sufficient for my present purpose to remark that *inflammation* is

claimed distinctly to be the essential characteristic. In other subsequent remarks, Prof. Clark declares that "the *primary* lesions are in the organs of generation, the *secondary* are in the blood, and are found, indeed, in almost every organ of the body." It seems to me that this is equivalent to a distinct avowal of the doctrine of local phlegmasia. The whole question of contagion must turn upon this point, for if it can be established that puerperal fever is simply a local phlegmasia, modified only by the puerperal state, I think we shall be compelled to give up the doctrine of contagion. Besides, the pathology of the disease must form the basis on which to rest all intelligent discussion of its treatment. As preliminary to an expression of views in regard to the pathology of the disease now under consideration, I may remark, that important as is pathological anatomy, now so zealously cultivated, its prominence in the present age has resulted in some evils. It has led to exclusive *solidism* in medical doctrines, as is strikingly manifest in the opinions held by many in regard to other of the zymotic diseases, as typhus fever and cholera, as well as puerperal fever.

It seems to me a very important question to determine whether, in puerperal fever, the primary lesions are in the organs of generation, and the secondary are in the blood, or whether the order of phenomena is not reversed! This involves the whole question in discussion. It is only asking, in other terms, whether puerperal fever be a local phlegmasia or a zymotic disease. In as brief terms as may be consistent with clearness, I will assign my reasons for believing that puerperal fever is a zymotic disease, having an essentiality altogether distinct from inflammation of any tissue or structure of the body, even in a puerperal woman. Here I wish to remark that the puerperal state, *per se*, cannot alter, in any sense, the laws which govern inflammation. It may, and undoubtedly does increase, under certain circumstances, the susceptibility to inflammatory action, but it may, and often does, produce a condition of the system directly antagonistic to inflammation,—such a condition as must notably decrease the tendency to inflammation; and it is precisely in this latter condition that we find the most virulent, the most intractable forms of puerperal fever. What do we mean by the puerperal state? It can only mean the physiological and pathological organic changes induced by gestation, the organic changes produced by parturition, and the physiological changes which follow it. Now there are nothing in these changes which can essentially change the laws of inflammation, when we have inflammation alone. Occurring under

these conditions, I think I shall subsequently show that it does not materially differ from inflammation occurring in the non-puerperal state. Now, in giving my reasons for believing that puerperal fever has an essentiality, that it is something entirely distinct from local phlegmasiæ, it will be seen that I adopt a line of argument parallel with that followed by Dr. Stokes in his masterly lectures on typhus fever.

First, then, *puerperal fever has no anatomical character*. That there are a great variety of structural lesions found, all will admit. The four principal lesions are, as Dr. Clark has said, those of the peritoneum, of the veins of the body of the uterus, of the lymphatics, of the inner surface of the uterus. And then we have lesions of the pleura, of the lungs, and pus in the liver, in the muscles, in the joints, and pus in the blood. But where we have a group of symptoms so resembling each other that they are almost identical, we do not have constant or uniform structural lesion. They are inconstant in their seat and their amount. In the same epidemic we have the greatest possible variety in their seat and their amount. Lesion of the peritoneum may be present or absent,—so of the uterus, so of the lymphatics, and so of the veins. In those cases, which Oslander, Gooch, Locock, and Simpson, suppose to be cases of puerperal fever without lesion, conceding the correctness of Prof. Clark's view, that with a proper examination pus might have been found in the veins of the uterus,—that they really were cases of pyæmia, what does this prove? In legal parlance, I should put in a demurrer. Admit the fact, will any one claim that all cases of puerperal fever are cases of pyæmia, and that inflammation of the inner surface of the uterus, or of its veins, is an essential anatomical characteristic of puerperal fever?

2. *These lesions are often not sufficient to influence the progress of the disease, or to explain the cause of death*. The most malignant form of the disease, that in which a fatal result occurs the most speedily, offers the fewest and the least striking structural lesions. The longer the disease continues, the more prominent and the more manifest are the organic lesions. Does not this prove that the lesions are consecutive or secondary,—that there is a primitive source, an original cause of vital depression, which sometimes destroys life so rapidly that there is no time for the development of the secondary morbid alteration. The symptoms are not, then, the result of these lesions, but the result of some specific agent—some morbid poison, which subsequently develops the autopsic lesions. Sometimes this

morbid poison so overwhelms the system, that the patient dies in a few hours, without any reëctional symptom. It is not in these cases that we have the most marked structural lesions.

3. *We may have inflammation, even to an intense degree, of any of the organs in a puerperal woman, in which the principal lesions of puerperal fever are found, and yet the disease will lack some of the essential characteristics of puerperal fever.* I mean to say, we may have peritonitis, or phlebitis, or metritis, in the lying-in woman, and yet the disease will be quite distinct in its mode of attack, in its symptoms, in its morbid anatomy, and in its treatment, from puerperal fever. Take peritonitis, for example: it may be excited by a difficult and protracted labor, by the application of cold to prevent hæmorrhage, by improper exposure, and by other well known exciting causes. But puerperal fever, with the peritoneal lesion, may attack the patient after most favorable delivery, and without any obvious cause. Then the symptoms of the disease show that it has a special character, for in the puerperal fever, with the peritoneal lesion, the symptoms of the first stage of peritonitis are absent; the peritoneal symptoms are those of the second stage, or that of collapse, as for example, we have diarrhoea very frequently instead of obstinate constipation. The pain in peritonitis commences in the region of the uterus. In puerperal fever the pain often commences at the epigastrium. In peritonitis the pulse corresponds in character with the local symptoms, increasing in frequency as the local symptoms increase, diminishing as they disappear. In puerperal fever the pulse bears no relation, or at least a very slight one, to the local symptoms. In puerperal fever it is the pulse which tells the story, as to the exact condition of the patient, not the local symptoms. So also we may have phlebitis in the puerperal woman, and not have puerperal fever. No one, at the present day, would use the term phlegmasia alba dolens, and puerperal fever, as synonymous. Yet this is a phlebitis, a circumscribed, adhesive inflammation of the vein, to be sure, but nevertheless a phlebitis. But I go farther: we may have uterine phlebitis, and not have puerperal fever. The same contrast could be drawn between the two, as regards the mode of attack, symptoms, and treatment—the difference being, that the one disease follows the laws of ordinary inflammation, and that in the other the toxæmic origin of the disease gives it quite a different character. These differences were strikingly illustrated in the recent epidemic at Bellevue Hospital. In the beginning of the epidemic I had charge of the lying-in wards. I must ask permission to read a short extract

from the April number of the **AMERICAN MEDICAL MONTHLY**, giving some clinical remarks of my own, made at Bellevue Hospital on the 7th of February last :

"In the latter part of January, succeeding a period of almost unparalleled cold, came that long spell of warm, damp, close, foggy weather. This change had scarcely set in, when one after another, as the women were delivered—these wards having been previously healthy—they began to develop, one pelvic cellulitis, another peritonitis, another ovaritis, another metritis, all of the asthenic type, and with an early tendency to gangrene or suppuration, while scarce one escaped without a threatening at least, of those terrible torments of nursing women, sore nipples or mammary abscess. Indeed so well established did this state of things become, that a pulse of one hundred and twenty and a flushed cheek were looked for as matters of course on the morning after confinement, and the pleasant, soft pulse, and cool skin of the physiological recovery, were luxuries which the attendant physician dwelt lovingly and long upon, when at long intervals they presented themselves. These cases, notwithstanding that they bore the outward semblance of inflammations, were yet, in their mode of progression, constitutional effects and indications for treatment so different from the ordinary phlegmasia as to lead Dr. Barker to announce his belief in the specific character of these diseases; that the quasi inflammatory processes taken on by these organs were, in reality, the results of the action of a poison infused into them through the blood, and stirring up its peculiar excitement wherever it found the proper amount of combined irritation and exhaustion to insure it a nidus, just as the typhoid poison awakens its deceptive pseudo-inflammations in the brain, the lungs, the intestines. 'Treat these cases,' said he, 'as idiopathic inflammations, and you must inevitably kill your patients.' Most of these cases were treated successfully, by early local derivation or depletion, followed or even accompanied by profuse general stimulation. Three, however, terminated fatally, two by suppuration into the pelvic cavity and purulent absorption, in one of which a large number of abscesses, from the size of a walnut down, were found in the lungs—and one by gangrene of the cervix, extending to the mucous membrane of the body, and involving to a slight extent, the posterior walls."

The next point, to which I wish to call attention, is *that the lesions themselves differ materially from those having an inflammatory origin*. Professor Murphy has so clearly pointed out these



distinctions that no apology is necessary for quoting them :—

"In *peritonitis* all the arterial capillaries are highly injected : hence the intestines are streaked with bright red lines of capillaries that encircle them. In *puerperal fever* the venous capillaries predominate : hence the livid hue of the intestines, and the dusky red color of the patches and streaks on their surface. In *peritonitis* the lymph which is poured out is adhesive, uniting the different parts like glue. If removed from the surface of the intestine on which it is deposited, the strings of this lymph are broken across, and the surface is rough ; the quantity of serum poured out is not great, and, being lodged in the cavity of the pelvis, may at first escape observation. In *puerperal fever*, that which we call lymph is not adhesive : it is much more abundant than adhesive lymph, covering the fundus of the uterus, the intestines, the liver, the diaphragm ; it is found, also, in the pleura : its color varies from a dusky brown to a pale yellow : it may be peeled off the liver, the intestines, or the uterus, quite easily : the surface from which it is taken is smooth, and that of the intestines is a dark red color. The quantity of serum is equally profuse ; and this substance being dissolved in it, gives it a lactescent appearance, like pus : hence it is called sero-purulent fluid. Thus, when the abdomen is opened, a large quantity of this fluid always escapes. It will be objected that this sero-purulent fluid is also met with in *peritonitis*. This is perfectly true ; but it is necessary to note the stage of the inflammation in which it is observed. I have never met with it unless in the second stage of the attack. When a patient died in the first stage there was none of it. I conclude, therefore, that in the former instance (the second stage) such effusions only occurred when the constitution was sinking under the attack ; but in the latter, when death took place from a different cause, the effusions noticed were the true products of inflammation. In *puerperal fever* the greater the intensity of the seizure the less the chance of meeting anything like lymph. In the most intense forms no effusion at all may take place. In a degree less intense, a large quantity of serum, colored brown by blood, is found in the peritoneum and throughout the tissues : the lymph poured out is of the same color, having no adhesion to the surface on which it lies, as if the effusion of disorganised blood had been deposited there. In the next degree the same kind of lymph, or albumen is found, of a yellow color, with a quantity of sero-purulent fluid. And lastly, in the case, in which the constitution for a time struggles successfully against the fever, some adhesive lymph will be

met with, mixed up with a larger quantity of what I have just described."

The next argument which I adduce in proof of the doctrine that puerperal fever is a zymotic disease, and not a local phlegmasia, is *that simple inflammatory diseases are not communicable from one patient to another through the medium of a third party*. It may be objected that this argument assumes that puerperal fever is thus communicable, which is not proven, and is one of the points now under discussion. With all due deference to those present who may differ from me, if any such there be, I must be allowed to say that I think no one fact in medicine is better established than this. The question of contagion is not one of abstract reasoning, but one of facts; and of these facts, a few, amounting to positive demonstration, must be conclusive. Negative testimony is utterly worthless in settling such a question. I should almost feel that I insulted the intelligence of those present by entering into an argument on this point at the present day. Prof. Oliver Wendell Holmes, in his essay on the *Contagiousness of Puerperal Fever*, has brought together an array of facts, which must, I think, be convincing to every unprejudiced mind. For myself I would say, with Dr. Blundell, that I had rather those I esteem the most should be delivered, unaided, in a stable, by the manger-side, than that they should receive the best help, in the fairest apartment, but exposed to the vapors of this pitiless disease. I would heartily concur with the emphatic declaration of Dr. Holmes, that "if, on this point, there is any voluntary blindness, any interested oversight, any culpable negligence, even in such a matter, and the facts shall reach the public ear, the pestilence-carrier of the lying-in chamber must look to God for pardon, for man will never forgive him." Now, then, if this disease is thus communicable, is there any other local phlegmasia that is thus communicable? It may be objected that dysentery is sometimes contagious. I think I have myself been through an epidemic of dysentery which was evidently contagious, but I should answer, first, that it remains to be proved that this form of dysentery is simply a local phlegmasia; and secondly, that there is no evidence that a healthy person can communicate this disease from one person to another.

My next argument is that *the prophylaxis of puerperal fever is not the prophylaxis of local inflammation*. In the large hospital of Vienna, from 1840 to 1846, one in every ten mothers delivered perished, chiefly from puerperal fever. In May, 1847, Dr. Semelweiss prevented students from touching parts at the autopsies, and directed



all of them to wash their hands in a solution of chlorine, before and after every vaginal injection; and the mortality from this time so far diminished that in 1848, not above 1 in 74 mothers died. Does not this fact prove the toxæmic origin of the disease in these cases, and that the local lesions are secondary—reactive, and have less pathological value than the change which precedes it?

It may be objected that the views which have been advanced as to the pathology of puerperal fever, entirely ignore the existence of an epidemic influence, and that the epidemic influence may give a specific character to the local phlegmasia. From Sydenham, we have learned the phrase, "type of the season," and another phrase has come into use, meaning nearly the same thing, viz: "epidemic constitution." Now what is meant by these terms? Clearly they must refer to certain atmospheric or telluric influences which modify the susceptibility of the system to disease, or which increase the virulence of the poison which develops disease. That this influence really exists, acting in both ways, I think there can be no doubt. It sometimes produces its influence wholly on the system, diminishing the vital resistance to disease, and rendering inflammatory action, asthenic in its type; or the opposite result may be produced. So also, it may increase the virulence of the poison which gives rise to the zymotic diseases. Puerperal fever is most notably susceptible to an epidemic influence. I have thus given my reasons for believing that puerperal fever is an essentiality, that it is a zymotic disease, resulting from the absorption of a specific poison, and that its anatomical lesions are secondary.

The etiology of this disease has been so fully and so ably brought before the Academy by Prof. Smith, that I should not expect to be listened to with patience if I attempted to add anything to what he has said. So also in regard to its semeiology, it would be presumptuous in me to attempt to add anything to what is already known to the profession. The question of contagion, is one on which the profession is divided. My own views on this point have already been sufficiently clearly expressed. I certainly would not, at this day, seek to change the views of any one who has intelligently formed a different opinion, for I should deem it a hopeless task. As I do not intend again to occupy the time of the Academy during this discussion, I will beg your indulgence while I make a few remarks in regard to the treatment. This is the grand aim to which our discussion should tend, and its practical value rests on the bearing which it has on the therapeutics of the disease. The statistics

of the disease show that when it prevails in an epidemic form, about one in three die. It is to be hoped that in the progress of medicine, the resources of art will prove successful in greatly diminishing this frightful mortality. In some cases, the morbid poison is so intense as to overwhelm at once the vital powers. Just as in some cases of malignant scarlet fever, there is no capacity for reaction, and the patient dies in a few hours after the attack. In such cases as these, art must stand back appalled. The treatment of puerperal fever has afforded quite as fruitful ground for controversy as its pathology. I do not propose to review the various plans which have in different epidemics been supposed by violent partisans to be the most successful. I shall only refer to those general principles which should in my estimation govern the treatment—and give a few illustrations of some special methods of treatment. There are no specific therapeutics for puerperal fever. The sooner this idea is dismissed from the mind, the more probable is it that the treatment adapted will have a rational and philosophical basis. No one method is adapted to all types of the disease. It must vary according to the virulence of the epidemic or special poison, according to the condition of the system as to its vital powers when the poison is received, and according to the intensity and severity of its secondary lesions. I should say in general terms, that the indications are : *First, to eliminate from the system as much of the morbid poison as is possible by means of depletion and the other evacnants, as purgatives, emetics, diuretics, &c.*

Unfortunately this indication, owing to the peculiar character of this disease, can rarely be fulfilled, except to a limited degree. In the opinion of some, venesection is the grand remedial agent for puerperal fever, although, at the present day, the advocates of this measure, as essential to its successful treatment, are few in number. It proved to be the most efficient remedy in the epidemics met with by Gordon, Hey, Armstrong, and in one seen by Gooch. But in other epidemics, we have the testimony of equally sagacious observers, that it could not be borne. It proved an agent of destruction. Prof. Murphy has well made the point, that it may prove useful, where it can be tolerated, as a means of evacuating a certain amount of the materies morbi, thus relieving the central organs in which this poisoned blood has accumulated. It has not been my lot to see those epidemics which would tolerate blood-letting, yet I believe there are some. In sporadic cases it is, doubtless, much more frequently indicated. It seems to me that the principle which should

govern our practice in this disease, should be the same as would govern our practice in any other disease. Venesection should never be resorted to simply because the case is one of puerperal fever, but because the symptoms indicate that depletion is necessary. Admitting the pathological view, that "the fever is a natural effect of intense constitutional irritation, from local inflammation," it does not follow that blood-letting will be the remedy, or even that it can be tolerated. Rejecting this pathological view, it does not follow that venesection is not sometimes of great importance in the treatment of this affection. I hold that it is equally absurd to insist upon this as the cardinal remedy, as to denounce it as never applicable in the management of this disease. Common sense, not theory, must be our guide in regard to the use of this measure. The same general principles should govern us, in resorting to purgatives, emetics, diuretics, &c. Each of this class of agents has had warm advocates, and have, undoubtedly, been specially indicated, and proved eminently successful in certain epidemics. They are neither to be excluded wholly, or relied upon entirely, in the treatment. They may be indicated in certain cases, but they are only to be resorted to when there are special indications for their use. We are to remember that it is not generally our rôle to put out the fire, but to treat the burn, and hence the importance of the second indication, viz :

*To control the vital disturbances resulting from réaction.* These are principally vascular excitement and nervous irritation. It is unnecessary for me to enter into an elaborate argument, to prove the importance of these indications, for it is obvious that by vascular excitement and nervous irritation, the vital powers are exhausted, and death follows. It has been before remarked that it is the pulse which indicates the condition of the patient, much more than the local symptoms. Of the agents for reducing vascular action, we have first, venesection, when it can be borne, which is rarely the case. This means of reducing vascular excitement involves a loss of vital power. But we have, in the *Materia Medica*, an agent lately brought prominently before the profession, which acts specifically as an arterial sedative, without depressing the vital powers. I refer to the *veratrum viride*. We are indebted to Dr. Tully, of New Haven, for our first knowledge of its medicinal properties, and the profession in certain parts of Connecticut were familiar with its use long before Dr. Norwood's name was associated with it. It is simply and solely an arterial sedative. By it the pulse can be brought under volun-

tary control. For more than twelve years I have been accustomed to use it for this purpose, and for several years I have used it in puerperal fever, and in no disease have I seen its value more strikingly exhibited. It is an agent which requires care in its use, and in those cases where its full effects are required, I never allow them to be left without careful medical watching. The patient must be seen at short intervals. I have never seen any unfortunate results from its use, but I have seen it give rise to very severe temporary depression.\* As an illustration of its action, I will read the report by Dr. Cobb, House Physician, of a very severe case of puerperal fever, which occurred in my service at Bellevue Hospital :

" Kate Short, aged 23 years, fell in labor in full term at 2 o'clock P. M., Feb. 25, and was delivered of a healthy child at 8½ o'clock on the morning of the 26th. Nothing unusual occurred in her labor, except that the second stage was somewhat prolonged. Placenta came away in due time, and was not followed by hæmorrhage. First pregnancy.

February 28th, at 8 A. M., she was seized with a very severe chill, followed by increased frequency of pulse, and pain over hypogastric region, extending as high up as the umbilicus. This pain was very much increased by taking a full inspiration, or by the application of pressure. Tympanitis very considerable. The discharge abundant and very offensive. Pulse 140. Respirations 24.

At 1 o'clock P. M. Dr. Barker saw her, and recommended that she should be transferred to the Fever Wards, and put on the use of the *Tinctura Veratri Viridis*.

At 2 o'clock P. M., after having been removed to the Fever Wards, her pulse was 140. Respirations 24. Pain over hypogastric region intense. Tympanitis very considerable. Discharge abundant and very offensive. No mammary secretion. Dr. Barker

\* There is a marked difference in the power of the article grown at the South, as compared with that grown at the North, which should not be forgotten in prescribing it. When I removed to this city, in 1850, the *tinc. veratrum virid.* was not kept by the druggists here, and I therefore procured some from Norwich, Conn. I was accustomed to prescribe this (a saturated tincture made from the article growing in Connecticut) in doses of from 12 to 20 drops. In the first case in which I made use of the tincture now found in the shops here, alarming prostration was produced, and I soon learned that I must diminish, very decidedly, the dose. Prof. Dickson, of Charleston, S. C., informs me that 7 drops is a large dose of the tincture used at the South.

requested that she should be seen hourly by one of the House Staff, and that her condition, as to the state of the pulse, respiration, and other symptoms, and the dose of the veratrum viride given, should be recorded at each visit. The following is the record thus kept :

<i>February 28th.</i>	<i>Hour.</i>	<i>Pulse.</i>	<i>Resp.</i>	<i>Drops.</i>	
	2 PM.	140	24	10	
	3	127	22	10	
	5	140	22	10	
	6	152	12	10	
	7	130	20	10	
	8	80	20	9	Bowels moved once.
	9	75	16		Vomited a greenish colored fluid. Bowels loose.
	10	66	16	4	Vomiting ceased. Bowels moved once.
	11	65	22	7	
	12	58	13	2	
<i>March 1st.</i>	1 AM.	64	52	6	Respiration very irregular. Inclined to sleep.
	2	58	25	2	Sleeping.
	3	59	21		Hiccough and headache.
	4	60	18	1	Hiccough still continues.
	5	65	20		Severe headache. Vomited a greenish colored fluid.
	6	65	21		Headache severe, and very restless. Vomited several times within last hour. Hiccough.
					Vomited once since last visit. Vertigo and headache.
	7	58	20		Sleeping.
	8	54	23		
	9	60	19		
	10	68	21	1	Slight hiccough.
	11	70	23	2	
	12	80	28	3	Tenderness over abdomen, marked. Tympanitis somewhat diminished. Discharge dark, bloody, and very offensive.
					Visit of Prof. Barker.
	1 PM.	80	20	4	
	2	92	24	8	Face flushed.
	3	76	24	8	Sleeping.
	4	76	28	9	Sleeping.
	5	65	28	8	
	6	66	28	8	
	7	68	26	6	Slight hiccough. Bowels moved once.
	8	66	18		Vomited a greenish colored fluid.
	9	68	24		Vomited once since last visit.
	10	60	28		Sleeping.
	11	64	28		Still sleeping.
	12	56	28	2	Sleeping still.
<i>March 2d.</i>	1 AM.	55	32		
	2	79	24	3	Complains of pain in left thigh. There is slight swelling, and along its internal surface, over the course of the veins and lymphatics, the tenderness is so great that she can scarcely bear the lightest touch. Tenderness over abdomen still continues. Slight Tympanitis. Discharge abundant, dark, bloody, and very offensive. No mammary secretion.
	3	76	24	4	
	4	65	20	3	Sleeping.
	5	78	22	8	
	6	68	22	4	
	8	64	24	4	
	9	72	24	6	
	10	64	28	2	
	11	72	28	6	Bowels moved once.
	12	70	24	5	
	1 PM.	64	24	5	
	2	60	20		
	3	64	24		
	6	68	28	3	
	7	72	28	8	
	9	80	28	6	Face flushed.
	10	80	26	6	
	11	80	28	8	
	12	80	28	10	Sleeping.
<i>March 3d.</i>	1 AM.	80	29		Vaginal discharge now ceases to be offensive. No mammary secretion. Tympanitis still remains. Tenderness over abdomen still continues, though not so well marked. Tenderness and swelling in left thigh still continues.
	2	78	28	10	
	3	80	28	8	Slight hiccough.
	4	72	20	4	
	5	68	28		Vomited a greenish colored fluid. Headache. Hiccough. Bowels moved twice.
	6	64	24		
	8	60	24		
		68	24	5	
		72	24	3	
		78	28	6	

March 3d.	Hour.	Pulse.	Resp.	Drops.	
	1 PM.	80	28	6	
	2	80	28	8	
	3	78	30	4	
	4	78	28	5	
	5	72	33	4	Sleeping.
	7	64	33	2	
	8	72	28	5	
	9	68	30	4	
	10	68	28	5	
	11	72	28	5	
	12	70	30	7	
March 4th.	1 AM.	72	33	8	Sleeping.
					Tenderness over abdomen not so intense. Slight tympanitis. Vaginal discharge now appears to be natural. Tenderness and swelling on internal surface of left thigh now seems to be diminishing. No mammary secretion.
	2	70	30		
	3	64	28	2	
	4	64	28	2	
	5	60	24	2	
	6	60	28	2	
	7	60	28	2	Bowels moved twice.
	8	58	28		
	9	60	28		
	10	56	28	2	
	11	64	33	3	
	12	72	24	4	
	1 PM.	75	32	6	
	2	80	28	8	
	3	80	24	8	
	4	80	30	8	
	5	80	28	8	Sleeping.
	6	80	33		
	7	64	24	6	
	8	60	24	2	
	9	60	28	2	
	10	60	24	2	
	11	60	28		
March 5th.	1 AM.	68	24	3	She now says she feels much better. Her countenance looks much brighter, and she appears to be much improved in every respect. The tenderness which has been so intense over the abdomen, now is scarcely noticeable. Tympanitis very slight. Discharge very scanty, but normal. No mammary secretion. The swelling and tenderness on the internal surface of the thigh, in the course of the veins and lymphatics, has now disappeared altogether.
	2	68	28	4	Sleeping.
	3	68	22	2	
	4				
	5				
	6	70	30	6	
	7	64	24	4	
	8	64	24	6	
	9	76	24	6	
	10	72	28	6	
	11	64	24	3	
	12	68	24	6	
	1 PM.	64	28	5	
	2				
	3	66	28		
	4	64	24	5	
	5				
	6				
	7				
	8	68	28	4	
March 6th.	10	72	24	4	
	8 AM.	70	24	6	Feels well; improvement marked. No tenderness on pressure over abdomen. No tympanitis. Discharge still scanty, but normal. Slight mammary secretion.
	11	76	24	4	
	12				
	1 PM.	72	24		
	2	75	28	8	
	3				
	4	76	28		
	5				
	6				
	7				
	8				
	9	72	24	4	
March 7th.	9 AM.	76	24		She says she feels well and hearty. No tenderness over abdomen. No tympanitis. Vaginal discharge healthy. No tenderness or swelling in left femoral region. Appetite good. Bowels regular.
March 8th.	10 AM.	76	24		Continues to improve very fast.

From this time she continued to improve, and in a short time was discharged as well and hearty as she ever was."

Now here is a case occurring in a hospital, at the time of an epidemic, presenting a combination of symptoms which all familiar with the disease would pronounce truly alarming. By the *verat. virid.* the pulse was brought down from 140 to 60 per minute, and it was never permitted to rise above 80. The quantity administered varied according to the condition of the patient, two, three, or four drops being frequently sufficient to control the vascular excitement. No other medicine was used. In many other puerperal cases, I have seen equally striking results. I will briefly mention one which I saw, in consultation with Dr. Sayre, the tenth day after confinement. She was a primipara, and her convalescence seemed perfectly normal, until the sixth day, when she began to exhibit some appearance of mental disturbance. She was especially anxious in regard to her religious condition. Gradually a high state of nervous excitement was developed, with insomnia, and when seen by myself, she had been decidedly maniacal for more than twenty-four hours. Her respiration was short and hurried, her pulse very rapid, her countenance anxious and frightened; she was incessantly talking and starting with apprehension, from the slightest movement in the room. No physical exploration could be obtained, but there were no local symptoms indicating pelvic trouble. She sat up in bed, and moved from one part to another with great rapidity. The *verat. virid.* was now given, and by its influence the pulse was brought down below 70 per minute, the respiration became slower, the mind tranquil, and she was enabled to sleep. I am informed by Dr. Sayre, that in the course of a few days there was developed, in the pelvic cavity, an extensive abscess, which pointed externally, near the sacrum. Her convalescence was somewhat prolonged, but she eventually recovered.

One of the most important indications we are called upon to fulfil, in the management of this disease, is to allay nervous irritation. There is no doubt that the most frequent of all the lesions of puerperal fever, are those of the peritoneum, and that the disturbance to the nervous system is much more severe than from any other local cause. It is well known to most of the profession, that within the last four or five years, this has been treated by heroic doses of opium, or of some of its preparations. It has long been used by the profession in the treatment of peritonitis, and Graves and Stokes have demonstrated its great value in idiopathic, or traumatic peritonitis, but to Prof. Clark belongs the honor of fully testing it, in what he calls puerperal fever, with peritoneal lesion. This is his own ground,



and I will not encroach upon it, inasmuch as we hope to have, in detail, the results of his enlarged experience. I have treated a few, a very few compared with him, by this method. It is astonishing to see to what extent patients will tolerate opium, where the peritoneal lesion predominates, but it is only in this form of fever that this great tolerance exists. The quantity given in some cases, without producing narcotism, is enormous. But there is one point to which I wish to call attention, and that is a test whether the action of this drug is proving beneficial or not. If opium be pushed to incipient narcotism, or a point little short of it, a gradual decrease in the frequency of respiration results. In some of my cases, the respiration went down to 14, 12, and 10 per minute. Now, then, the opium treatment is acting beneficially, when, in connection with the reduction of the frequency of the respiration, there is a corresponding decrease in the frequency of the pulse, but if the opium is pushed to the point of incipient narcotism, the respiration growing slower and slower, without a corresponding decrease in the pulse, I should say the opium treatment is to be abandoned at once. In one case that occurred at Bellevue Hospital, some two years since, the opium had been pushed to such an extent, that galvanism had been resorted to to make her breathe. When I saw her, the respirations were 10 and 11 per minute, while the pulse was about 140 per minute. Seeing this slow respiration, with the frequent pulse, I suggested that no more opium should be administered, as I thought its continued use would be likely to overwhelm the vital powers. The *veratrum viride* was then given, and in a few hours the pulse came down below 80. This patient eventually recovered. I will state, then, as my conviction, that in that class of cases where the peritoneal lesion predominates the opium treatment has proved successful to an extent which no other has.

In many cases, to control the vital disturbances resulting from reaction, it will be necessary to use a variety of agents to accomplish this end. Venesection, *veratrum viride*, opium in full doses, camphor, all may be indicated, and prove eminently serviceable in the same case. In illustration of this, I will mention a case which occurred in my private practice. The patient, a primipara, was delivered by the forceps, after a very severe labor, on the 4th of July last.

On Sunday, the 5th, everything seemed to be going on in the most favorable manner. I saw her again on Monday morning, and there was no indication of disturbance of the general system, except that she complained somewhat of nausea, her breath smelled like raw

beef, and the tongue was covered with a pasty, white coat. I was sent for to see her again that day, between 5 and 6 P. M. I found that she had been seized, a little time before, with a violent rigor, her countenance was pale and haggard, wearing an anxious, despondent look. She complained of intense pain over the lower part of the abdomen, particularly over the left iliac region. Her pulse was about 132 per minute. Here was a case calculated to excite the gravest apprehension. The following prescription was made, and it will at once be apparent what indications it was designed to fulfill :

R.	Pulv. G. Camphor,	-	-	5ss
	Sol. Morphiæ (Majend.),	-	-	gtt.lxxx
	Tinc. Aconite,	-	-	-gtt .xvj
	Mucill. G. Acaciæ,	-	-	5jv
M. S.	A tablespoonful every second hour.			

Turpentine fomentations were applied to the abdomen. She was seen again by me late that evening. The pain was decidedly less, but the pulse continued very frequent. She obtained no sleep that night. The mixture was continued the next day, at intervals of four hours. On the third day from the attack, fifth after delivery, she was seen by my colleague, Dr. Peaslee, who found that the pain had ceased, skin soft, pulse 92, but there was still this pasty coat upon the tongue. She subsequently had some swelling and pain in the left leg, along the track of the crural vein, but this continued but two days. The mixture was continued in diminished doses for several days afterwards, as the pulse continued frequent after all the local symptoms had disappeared. She had no mammary secretion. Under this treatment alone she perfectly recovered. I will give a brief outline of another case, which was to me most interesting and instructive. This patient was confined about the 1st of August, and in this case also the forceps were necessary on account of the position of the head. It was the right occipito-iliac posterior, the occiput rotating back to the sacrum, instead of anteriorly. After the labor was completed, I gave her a full dose of opium, as I usually do, when it has been severe. For two days after delivery, everything went on favorably, but on the evening of the third day, she had a slight rigor, and was seized with a most intense pain in the lower part of the abdomen and in the vagina, so severe that although a person of great self-control, she shrieked out with agony. Her pulse was very rapid. Turpentine fomentations were applied to the lower part of the abdomen, and Majendie's Sol., in full doses, was given until the pain subsided. The pulse continuing very rapid,

I then gave the *verat. virid.* in 12 drop doses every hour, until the pulse was brought down below 80, and there it was my aim to keep it. On the evening of the fifth day after confinement, I was sent for in great haste, when I found her with symptoms of cerebral congestion of the most alarming character. The attack had come on suddenly, without premonition. She complained of asphyxia, her countenance was livid and turgid, and every appearance was such as to indicate the most imminent danger. I should mention that, although not a person of full habit, I had found it necessary to bleed her a few weeks before confinement.

I now opened a vein and abstracted about 30℥, which at once relieved her of her cerebral symptoms. Previous to her confinement the urine had been tested for albumen, but none was found. The blood now drawn was examined by my friend, Prof. Doremus, and found to contain urea. I say after bleeding there was entire and complete relief from all the cerebral symptoms, but still the pulse remained rapid and frequent, and there was still a tendency to pain in the vagina and pelvic cavity, requiring the occasional use of Majendie's solution. The point that I wish to call attention to is, that the second day after venesection the local symptoms disappeared in a great measure, but if the *veratrum viride* was not continued the pulse would become extremely rapid, and this patient required the constant and steady use of this remedy for thirteen days. It may be said by some that these were not cases of puerperal fever, and I have anxiously asked myself the question whether they were so or were cases of local phlegmasia. I answer that they were cases of puerperal fever, and I will mention only one reason for believing so, viz : after all the local symptoms had disappeared there was still left evidence of poison in the system as shown by the rapid pulse.

3d. *To combat the local secondary lesions which may be developed.* I will not take up the time of the Academy in enlarging upon this part of the treatment. Local depletion, counter-irritation, fomentations to the abdomen, turpentine endermically, opium to subdue pain, chlorinated injections—the value of all these measures where special indications for their use exist, has long been settled by the profession. The discriminating physician will employ each or all of these methods as adjuvants to the radical treatment of the case.

I will only add one other indication, viz : *to sustain the vital powers of the system.* In other words, keep the patient alive. There are a certain class of cases where the system seems to be overwhelmed, and yet life will be preserved by the heroic use of stimulants and

good nutrition. I believe many are permitted to die from the neglect of these resources. It seems to me that after a patient with puerperal fever has lived for forty-eight hours, there is constant encouragement for effort, and that the danger is, in a certain sense, diminished in proportion to the duration of the disease. Without enlarging upon this topic, I will read a brief abstract of another case, reported by Dr. Cobb, which occurred in my service at Bellevue Hospital, which I think will illustrate my ideas better than argument. This patient was so utterly prostrate by the disease, and had such a variety of secondary lesions, that she was regarded by myself and all who saw her as past praying for.

"Matilda Smith, aged 21 years, first pregnancy, was delivered, in the lying-in wards of Bellevue Hospital, of a healthy child, at full term, at 8 P. M., February 11th. For the first few days after delivery she appeared to be doing well. Nothing unusual occurred to call attention to her case until February 17th, when she had a severe chill, with a quick, rapid pulse, and intense pain over the region of the uterus. The vaginal discharge was profuse, very dark colored, and excessively offensive. A large blister was applied over the region of the uterus, and Dover's powder, calomel, and camphor were administered, and she was removed to the fever wards.

This treatment was continued for forty-eight hours, but without benefit. On the contrary, her symptoms were constantly growing worse. Her pulse was above 140, weak and irritable. Exquisite tenderness over the uterus, the vaginal discharge abundant, very black, and extremely offensive. She vomited frequently a greenish colored fluid, and became somewhat deaf. Dr. Barker now ordered porter, milk punch, beef tea, as much as the stomach could take care of, and a full opiate at night. For ten days her condition varied but little from that above described. The stimulants were pushed to the point of tolerance, but the pulse continued very weak, rapid, and irritable. Her whole aspect was as bad as possible. Quinine was tried, but it could not be borne, as it induced severe headache.

February 28th she had an attack of capillary bronchitis, accompanied with profuse perspirations and coldness of the surface. This was relieved by extensive dry-cupping over the front and back, and the liberal administration of Carb. Ammoniae. A few days after an abscess made its appearance in the right mamma, which, when opened, gave exit to at least two pints of very offensive pus. She also had a large bed-sore. These three complications, capillary bronchitis, mammary abscess, and bed-sore, made their appearance about the

same time. Diarrhœa set in March 3d, which was found very difficult to control. On the 4th it is recorded that she took a moderate quantity of beef tea, two bottles of porter, and 30℥ of port wine. March 5th, she appears somewhat better. Pulse varying from 125 to 135. Perspirations still very profuse, and vaginal discharge was still very offensive. Tenderness over the uterus not so intense; diarrhœa ceased. From this time she gradually improved, but her convalescence was greatly retarded by the extensive suppurations in the mamma and bed-sore. Early in April she was discharged cured."

This case was watched with great interest by the students in attendance from the different Colleges, and I need not add that her recovery was as gratifying as unexpected. In the interesting history of the recent epidemic of puerperal fever in the Dublin lying-in-hospital, by Dr. McClintock, the present able Master, it will be observed that he found it necessary to make a liberal use of stimulants. Apologizing for the length of my remarks, I will occupy the time of the Academy no longer.

*Prof. Clark* then rose and stated, that he did not rise to continue the discussion. He congratulated the Academy upon hearing such an interesting paper from Dr. Barker. If he was not witty himself, he seemed to have been the occasion of wit. It had proved a good fortune to the Academy that Dr. Barker was not present when this subject had been brought up before. The Academy would agree with him that it was a very connected and substantial argument to prove his point. It did not differ very materially from his own views on the subject, and he would propose that it be continued for discussion at the December meeting, when he hoped to be present. At the time of the November meeting, he thought it probable that he should be obliged to be absent from the city.



# THE COMING MEDICAL MAN;

*AN ANNIVERSARY DISCOURSE DELIVERED BEFORE THE  
NEW YORK ACADEMY OF MEDICINE,*

*DECEMBER 8, 1874.*

BY

D. B. ST. JOHN ROOSA, M. D.,

PROFESSOR OF DISEASES OF THE EYE AND EAR IN THE UNIVERSITY OF THE CITY OF  
NEW YORK.



UNA FIDES, ALTARE COMMUNE.

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1874.

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## ANNIVERSARY DISCOURSE.

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MR. PRESIDENT AND FELLOWS OF THE ACADEMY OF MEDICINE.

GENTLEMEN: It is said, that when the victorious German armies had fairly entered France, after their recent contests on the frontiers, each general officer was furnished with full and accurate maps of the whole country to be traversed, even to its brooks and cross-roads, so that the entire force was soon in possession of a knowledge of what was ahead sufficient to enable it to go on with that confidence, which is so often the forerunner of success. These maps were prepared years before, when the two great nations, who afterward engaged in deadly strife, were at peace, and many of the feet that had often pressed wearily upon the roads and by-ways of France, for the purpose of making the charts, that were carefully copied in the war-office in Berlin, had no part in the triumphant march that finally ended in Paris. Yet, though unseen, they were none the less among their triumphant countrymen, and mankind awards to them also the laurels of the victor.

This kind of preparation for what may be in the future should not be, and is by no means, confined to the necessities of soldier-craft and war. The same spirit of anticipating the wants of the future is common to us all, and we are constantly building castles we shall never inhabit, and making maps we

shall never use. Fortunate will it be for us if the structures that we raise are ever inhabited ; if the plans that we make are ever of use to coming men, even if that use be the very slight one of showing that we aimed at something better than we had.

In the hour that has been assigned me by the council of this Academy, I propose to indulge in a little map-making, which it is hoped may in some small measure show the manner of the future advance of the medical profession : or I shall venture to give a sketch of what, as it seems to one mind, are to be some of the increased functions of the medical man of the future. I do not propose, however, to discuss in any fullness the subject of the probable future increase in our exact knowledge, nor to group and classify the gaps that exist in the territory of our science and art. This would certainly be an agreeable task, for the anticipation of a land yet to be possessed is a cheery one, but it is one that has been often well performed, and I trust will be again. But, for the purpose of the present discussion, it will be assumed that this progress will constantly be made, and our view will simply regard the results of this continued advance of the science of medicine in the position of the coming medical man.

Upon a subject so vast, and one which is dependent in its mode of presentation to so great a degree upon the habit of thought and opportunities for observation of the writer, I shall endeavor to speak without dogmatism, and certainly with no claim to entire correctness in the views presented. One mind can but outline such a subject, and even then some of the lines may be incorrectly drawn.

Although we may all have a just pride in the present position of our science and art, we are still, consciously or unconsciously, looking forward to the coming medical man, as to a being with more knowledge and wisdom than ourselves, who shall have a higher position than that of the physician of to-day. We are none of us quite satisfied with the present state of medical knowledge, or the present scope of the functions of medical men. This want of satisfaction is no evi-

dence that we are a race of grumblers ; far from it. Such a feeling is perfectly consistent with the most patient and cheerful work, and with a decided sense of contentment in that work. I am happy to believe, however, that the annual address to be delivered before this Academy, one hundred years from to-night, will be full of hope for the future, or, if you will allow your imagination to go so far, that, a thousand years from now, we shall have a race of medical men, still not content with the position of their present, nor satisfied with the memory of a mighty past. Indeed, if we ever settle down into a state of satisfaction with ourselves, we may consider our prospect of further enlargement of position and duties as hopeless. In these days, too, when distinguished scientists "prolong their vision backward across the boundary of experimental evidence," as hopeful students of medical science, we may be allowed to prolong ours forward, and map out the pathways and roads upon which we hope either we or our successors are to march.

There are several relations, which I may, perhaps, classify under three heads, in which the coming medical man will occupy an advanced and enlarged position from the one of to-day :

1. In relation to matters pertaining to education.
2. In sanitary science.
3. In the State.

I. By matters pertaining to education, I mean not only the education of the child, but also that of the man, or education in its largest sense. In his relation to the present system of educating children and youth, the physician is in a position that often becomes embarrassing, and which is sometimes wrong. He stands powerless in the midst of abuses that he cannot correct, and he seems to aid and abet them. We have practically nothing to do with the education of young children. On every hand in this city (and I fear the state of things is worse in other places) we see puny children going to ~~and from~~ school with books tied in their straps, or in their



quired of us, but they will certainly be among the functions of the coming medical man.

Some of the most horrifying reading of the day is contained in the annual reports of the New York Prison Association. In them are found detailed accounts of the condition of the Tombs Prison and of the county jails throughout the State. The dampness, filth, and overcrowding of some of these places are set forth in a manner so graphic that a report of facts becomes highly sensational. If a committee were appointed to go up and down the land, visiting our colleges, public schools, academies, and seminaries for young women; and if this commission should be brave enough to tell the whole truth about insufficient drainage of grounds, imperfect ventilation, and lighting of rooms; if they were to tell how many hours were devoted to study, sleep, and exercise respectively; what was the quality of the food; how many recitations occurred when the stomach was entirely empty, or containing only stimulating but slightly nutritious liquids; if they told also how many young women were violating ordinary physiological precautions—we should have some more of the same kind of literature as that furnished by the Prison Association, except that it would deal with a much pleasanter class of subjects. If an investigation were even made as to the quality of air in the lecture-rooms of our medical colleges, where, among other things, lectures on hygiene are delivered, I think this commission would have a somewhat startling report to make on that subject; and, as for our churches, it has long since been decided by the architects that a sufficient quantity of fresh air is not to be obtained in them.

The medical man of to-day lives in the very midst of these abuses. He attends the churches, he lectures in the colleges, where he is poisoned by carbonic-acid gas. He even goes into the schools as a medical adviser. He is permitted to vaccinate the young ladies when there is an epidemic of small-pox, and to deliver lectures upon anatomy and physiology, and here his work usually ends: but I am glad to say that it ends, not because the medical man is entirely unconscious of his true duties, but because he is not allowed to perform



them. Even the educated people, and we indeed ourselves, have not learned in any but an indefinite and most uncertain manner that the true function of the medical adviser is not so much to cure as to prevent disease. Yet we are looked upon in some quarters, on account of our feeble remonstrances against the enormities of some of the educational systems, as natural foes of education, and especially of that of young women. However that may be, the coming medical man will wage relentless war against the abuses that now obtain in our schools and colleges, and will finally overthrow them. We need only more such good work as that of Dr. Cohn, of Breslau, and Dr. O'Sullivan and Dr. Bell, of this Academy, to give us the facts as to our school-rooms, which by their poor lighting and overcrowding are producing so much short-sightedness and worse diseases, to excite a contest which will be short, quick, and decisive. In Prussia, where the need for soldiers seems to be more felt just now than any other, the government has been induced to remodel its school-houses, in order to preserve the coming generations from an amount of myopia which threatens to decimate their armies, by the exemptions on account of this defect of vision. Even the models of school-houses exhibited in Paris and Vienna, at the great Expositions, and examined by Dr. Cohn,<sup>1</sup> were defective, as to their lighting and seats, in quite a large proportion. How the average New York school-room, which was once a drawing-room lighted only in front and rear, or the college recitation-room, with one or two windows and an uncovered, flickering gas-burner to assist in picking out the Greek text on the short afternoons of November, would appear in such a report as that of Dr. Cohn, it is needless to show.

In Germany, where education is compulsory, and the ordinary letters, both written and printed, are much more difficult to decipher than our Latin characters, where populations are crowded, and school-rooms often wedged in among other buildings, the disease of short-sightedness has become almost a scourge. Our rural and backwoods school-houses, our long sum-

<sup>1</sup> "Die Schulhäuser und Schultische auf der Wiener Weltausstellung." Breslau, 1873.

mer vacations, when the older children are in the hay and harvest field, as well as our simpler curriculum of study, and perhaps a richer diet, have as yet allowed us to escape from their proportion of this disease. But, in our large towns especially, the causes that have been enumerated are producing graver as well as the same affections, while defective nutrition is giving rise to vast numbers of cases of insufficient development of the eyeball, and its consequent convergent squint.

Another great evil in our public schools, that has lately been pointed out by Dr. Bell,<sup>1</sup> is that children who are getting well of zymotic diseases are allowed to return to school without a physician's certificate, and thus expose hundreds of well children to danger. I need not dwell longer upon the necessity for active medical interference both in the household and in the school-room, for the purpose of regulating our educational systems, especially as they affect the growing youth. It must be obvious that the coming medical man will have a wider field for work in this department of educational matters than he now assumes, or than is allotted to him.

As regards the higher or university education, when the students are of such an age that hygienic supervision is not, for many and apparent reasons, so necessary, the physician of the future, as one of the educated classes, will, I believe, have much more influence than we have obtained, and our part of the university training of the future will receive a fuller respect and support. There seems to have been quite as much interest in medical education in New York one hundred years ago, when three young men received the first degree in medicine that was ever granted in this country, as there is to-day. Unfortunately, with the growth of our city in business importance, the desire to make it a university town, which then pervaded many of the prominent citizens, seems to have been lost sight of. An effort has been made to build up academic colleges such as flourish in small towns; and while these, well as they have done their work, and renowned as are their teachers, do not successfully compete with the other colleges

<sup>1</sup> *The Sanitarian*, December, 1874.

of the land, the idea that New York is preëminently the place for true university training, and not for academic schools, does not seem to have been grasped but by very few. Law schools, schools of medicine and theology, have no difficulty in attracting students to this city, but as yet the general public do not see that these should be the objects of especial aid and care on the part of our citizens. The mass of our educated people seem to have no regard whatever for our medical colleges, except so far as there is a little personal interest from the relations of sons and brothers who are connected with them as teachers or students. This is about the same interest that is felt in well-regulated boarding or day schools, to which they have some personal attachment. These colleges are unendowed, except by the good-will of the profession and the money of their founders, and the founders are usually the faculty. They have done a good work in keeping our profession abreast of the knowledge of the famously-equipped colleges of the Old World, as well as a fair amount of original investigation, without money and sometimes without the sympathy of any but their teachers and students.

The lack of endowments is the cause of many sad results. Among many others, we may note the fact that many young men soon give up all thought of contributing any thing to the general professional knowledge, by original investigation, because after a short effort of this kind, without the aid of post-graduate courses, they have been obliged to fall into the ranks of those who labor primarily for bread-and-butter, and secondarily for science. Worse still, here and there a few, with a noble but mistaken ambition, have labored without means to combine scientific laboratory-work with the busy life of a general practitioner, and when the struggle, as it usually must be, was too great for them, they have succumbed to the physical consequences of overwork, and they lie in the church-yards, "mute, inglorious" scientists, with those virtues circumscribed which might have blest their race, had not—

"Chill penury repressed their noble rage,  
And froze the genial current of the soul."

Whatever may have been the additions that the medical profession of this country have made to the common stock of knowledge, and they have been neither few nor unimportant, they would have been largely increased by facilities at all equal with those enjoyed in the Old World. We have the men with the brains, but alas! up to this time, the educated people have about decided that whatever they may do about ministers, lawyers, and teachers, doctors must educate themselves. By the aid of their fellowships, endowments, and other university establishments, the workers of England, France, and Germany, have been gathering harvests for decades from fields in which we have only put in here and there a sickle. The coming medical man will, I believe, so impress himself upon the wise and generous people about him, or perhaps make himself so important a character in the State, that he will have the means, now debarred the men of our time, for making investigations which shall lengthen life and mitigate disease.

Although a learned profession, we have allowed jurists, theologians, and students of other sciences, to assume the entire control of our higher educational system, until it is actually believed, in many and high places, that medical colleges are by no means a part of university systems, and that all they can expect is a kind of *quasi*-relation to them. It is quite enough, it is assumed, if the mantle of the name of a great college covers their wants. This very city is every year giving hundreds of thousands of dollars to educate boys at Schenectady, New Haven, Cambridge, and Princeton, while it is paying very little for the instruction of men in New York; that is to say, undergraduate instruction is receiving all favor and encouragement, while post-graduate learning, the hardest to get, the most important for the nation (for the other will be got in some way or other by private means) is without assistance. There never, perhaps, was a better field for a university system than New York. We could soon increase our number of say two thousand students of medicine, law, divinity, art, and pure science, to five times that number, to the manifest benefit of our country in all relations, had we the money to pay eminent men for teaching, and to found fellowships as prizes for

the few who prove worthy of special and enlarged facilities. As it is, those of our young men, who can afford it, cross the ocean for what they ought to find at home.

Our wants are simple; we do not need an educational system on the basis of that of England, with its gorgeous piles of architecture, the accumulated riches of centuries of national life, but we may be content with very simple exteriors, provided apparatus and laboratories, libraries and scholarships, are furnished us.

We have now three medical colleges, each doing its work in an earnest and successful manner, but where they leave their graduates, we need a higher training to step in, and supplement or amplify their work. These colleges should also have the entire sympathy and active coöperation of all men who wish well for their country and themselves, for the safety of every citizen, the restriction of pauperism and crime, depend very largely upon the kind of physicians they graduate. Already New York receives students from the oldest countries of the world, from China, Japan, India, and Armenia. Had we ample university facilities for them, they would come in hundreds, and carry back knowledge which should do much to make the world akin. New York commands some of the ablest divines of our time. Its law courts are perhaps only second to those of London in importance. Our press scatters its issues over the whole world, with an influence only limited by a knowledge of the English tongue. Our hospitals, dispensaries, and infirmaries, afford the opportunities for the study of almost every form of disease. Where there are now hundreds at the doors of these departments of human learning, the coming man will see thousands, if our people are wise in time. The Government of Switzerland, with a wisdom that every summer exemplifies, in the material prosperity that it brings, at an outlay of money that is simply enormous, has built magnificent highways over its Alpine passes, and planted places of rest on every beautiful prospect. If we, in educational matters, were to imitate the wisdom of that little republic in its material affairs, if we were to open the avenues

for science in this city, we should see ways, hitherto inaccessible and unoccupied, constantly traversed, and new points of observation incessantly occupied, and from these facilities would come results as important to the world as those New York inventions—the navigation of rivers by steam, and the transmission of news by electricity.

II. Before entering upon the consideration of the probable relations of the coming medical man to sanitary science and systems, I will venture to answer a question which is sometimes asked in a semi-jocose way. While its solution is too remote to be thoroughly practical, and it is never perhaps asked in great seriousness, there is in that which suggests such an inquiry, such a want of appreciation of the real functions of a physician, that a moment's attention to it may perhaps be pardoned.

The question to which I allude, roughly stated, is about the following: "Are not you doctors working against your own calling, when you are expending so much zeal in attempting to prevent people from being sick? What will you have left to do, when sanitary science is so perfected as you are endeavoring to make it?" There are several obvious answers to this question. The medical man of the future will, it is true, have his duties somewhat changed by the advancement of sanitary science, but at the same time they will be greatly amplified, so that physicians will be more numerous in the future than now. Sanitary science does much to prevent epidemics of fever, small-pox, and cholera; but our kind of civilization increases all the wants of men, and demands not simply a sound mind in a sound body, but a perfectly-working mind in a perfectly-working body.

It was a wise man who said that "he that increaseth knowledge increaseth sorrow." All the advancements that are made in the world cause us to be more exacting of our brains, our eyes, our ears, and perhaps of all our organs. For example, a Modoc Indian does not care about eye-glasses for near and fine work, because he does not do any thing that re-

quires any close use of his eyes; but educate the savage, or, going much higher up in the scale of humanity, educate the ploughman, and he will soon be critical, not only as to glasses at all, but as to their curvature. Still higher, make of him a professor, or a clergymen, or a microscopist, and he will begin to worry over a slight degree of hypermetropic astigmatism, and he will invent glasses that shall not only make him see well, but the very best possible. Take another example: contrary to old notions, physicians generally have been teaching the public for the last few years that a discharge of pus from the ear is always a serious affair. This correct teaching has not only materially lessened the cases of this dangerous affection, but has taught people to consider the causes which may produce otorrhœa, so that all pains in the ear and all sore-throats are being carefully considered, and thus the work of the physician has been actually increased.

In former times, if a man showed some little eccentricity in action, he was quietly tabooed as a queer stick; or, if he became somewhat violent in his eccentricity, the strait-jacket and the kindred restraints of what was appropriately called a mad-house, put him entirely out of the way. But the present medical man, and the coming one still more so, will diagnose the especial disease of the brain—for he considers insanity as much a material disease as jaundice—and place his patient in a *hospital* where he is to be cured and restored to society.

The modern appliances for the detection and cure of disease are simply the exponents of demands of mankind for the greatest amount of good work from good bodies, and we shall go on in these inventions and discoveries until the days of man are lengthened, and his physical capabilities are largely increased. Our good friends, the laity, may comfort themselves with the delusive hope that when vaccination has become universal, cholera and yellow fever completely banished, cancer and consumption curable, systems of ventilation and sewerage perfected, fever a myth, doctors and their bills will be alike unknown; but, at the dawn of this physical millennium,

we shall still have the birth and death of man, railway, steamship, and balloon accidents, and above all the superintendence and maintenance of the sanitary reforms and systems that are to prevent disease. Besides all this, so long as men refuse to obey the laws of health that are plainly set before them, they must receive their punishment in requiring the services of physicians.

It is to the medical profession that the general public must look for the main part of the work of what is technically called sanitary science, and that profession must be regarded as the final arbiter in all strictly sanitary questions. Yet the medical man of to-day has but a limited control over these matters, and in some places he has no control at all. We must not hastily ascribe this anomalous state of things, in which those whose mission it is to prevent and cure disease are restricted to the latter function, entirely to the influence of those not in the profession. Physicians themselves have been often forgetful of their high calling, and have neglected their plain duties. The loyalty of the great mass of the people, high and low, and especially the low, to the medical profession, is something to make us all profoundly grateful, and at the same time ever alert for the best interests of those whom we serve.

Medical men are just awaking to the great importance of sanitary science, and we cannot expect those not directly engaged in the studies of the laws of health to be further advanced than the students. The University of Glasgow has just recognized the necessity for positive teaching on sanitary subjects, by the appointment of professors with charge of this subject. Our own country, after supplementing the work of the medical department of the army in an admirable sanitary commission, has organized a National Health Association that gives promise of an important work. In fact, we are in the midst of a sanitary revival.

But, as to the details of the influence and control of the physician of the future in sanitary affairs, there is much to be said. It is only within a few years that this city has had, except in times of epidemic disease, what it now enjoys, a board



of men who know something about the important matter of health intrusted to them. It is a popular idea that, while to be a good watch-maker a man must be brought up to the business, to become a doctor in medicine, and to have authoritative opinions about medical science, one requires no especial knowledge. Hence, there have been Boards of Health who knew nothing of the preservation of health as a science, and even now properly-constituted boards have very little power to enforce the sanitary regulations which they regard as necessary. Many intelligent, well-instructed, I had almost said well-educated people, have not yet learned that they have no more actual right to enforce decided opinions upon the subject of preventing and curing disease, than well-educated cabin-passengers in an ocean steamer have to the avowal of authoritative ideas as to how the ship should be steered, or its engines managed. But, we have only as a profession to begin to show, by our devotion to our science and art, as a science and as an art, that we are what we claim to be, the proper guardians of the health of the people, to deserve, at least, to have our authority as much respected in all sanitary matters as is the Health Officer of the Port of New York, when his flag is seen, and his boat runs across the bows of an incoming steamship.

The insufficient influence exerted by the medical man of to-day in great sanitary questions may, I think, be illustrated by the teetotal crusade of the West, and the hydrophobia panic in New York. Whatever may be the individual views of the medical profession as to the expediency of ever using alcoholic fluids as a beverage (and I suppose we differ among ourselves on that point as much as other men), we are all agreed that the habitual use of distilled liquors, in contradistinction from light wines and beer, is highly injurious to the health and longevity of the human race. We are also agreed that the adulteration of liquors adds greatly to the dangers of intemperance. Yet, so imperfectly have we done our work of inducing restraint in the use of distilled liquors, and of attempting to substitute less intoxicating drinks for the national stimulant, whiskey, as well

as of preventing the adulteration of liquors, that war was lately waged in many of the towns and villages of the West, actual war, against the liquor-saloons, which an unhealthy moral sentiment had created. However great the evils of intemperance, a state of civil war will never overcome them, no matter with what motives undertaken.

In New York, in the summer of 1874, there occurred a panic that filled many a household with terror, because the majority of a board of city rulers enacted and enforced a law on a sanitary subject, which had the opposition of the medical profession, both officially and unofficially expressed. In order to guard our city against that fatal but very rare disease, hydrophobia, our idle young lads were educated at the public expense in theft and bloodshed, and such an unnatural dread and animosity were excited against man's most faithful friend of the brute creation—an animal whose life was perhaps as valuable as that of some of his persecutors—that a dog upon the island of Manhattan bade fair to be as great a rarity as the now extinct dodo. Our Board of Health was powerless, as it often unfortunately is, to do any thing more than to protest, while ignorance celebrated its triumph in the brutalities of the dog law. The coming medical man, by his exact knowledge, and his improved means and increased power for disseminating and enforcing that knowledge, will exercise such a controlling influence on sanitary matters, that total-abstinence crusades and dog-wars, will be unnecessary and unknown.

The medical profession has no desire to withhold scientific information from all those whom it may benefit, and undoubtedly our facilities for the spread of such knowledge will be increased, so soon as we can be assured that it will be prized and respected. But, with our insufficient authority, we have not as yet found, in many cases, a means of influencing the public mind without at the same time leaving a suspicion that there has been an advertisement of skill in curing disease, a thing that has been always repugnant to the tastes of the scientific as well as practising physician. The coming medical man will certainly announce his opinions on special subjects

more than he is now able to, but they will probably be found in the form of well-considered conclusions to be directly presented to the lay authorities whom they are designed to influence.

Yet, as I have before indicated, the little power that medical men have to enforce their sanitary opinions, sad as it is to say, is due very largely to their own supineness and want of practical judgment. There are countries in the world where scientists and especially medical scientists abound, men learned in all the causes and consequences of disease, and yet, in these countries so accustomed have people become to the foulness of filthy out-houses and open sewers, that their towns have become odorous enough to cause the average inhabitant of a less scientific country to regret the natural keenness of his scent. The studies of the laboratory and dead-house will produce no respect, unless their results are seen in a practical lessening of the sources of disease. We must see to it that, in becoming scientific about sanitary matters, we do not cease to be practical, or the coming medical man will have no more influence than does the one of to-day.

It has been for a long time taken for granted that Boards of Health, Commissioners of Quarantine, etc., are to be not only largely made up of men without medical education, but that the boards are to be at the control of partisans who look upon the management of sanitary boards as rewards for party services. The time is coming when, whatever we may have of civil-service reform in other quarters, we shall certainly have it in the care of the health of the people. With what satisfaction would the intelligent citizens of the State greet the reform which announces that our Board of Health, and our Commissioners of Charities and Corrections, were beyond the reach of partisan control, appointed during life and good conduct! In the future we shall see all this care of the health and charities of the city and State lifted far up above the vicissitudes of political strife.

The day is also coming when the medical responsibility for the condition of asylums for the blind, and deaf and dumb, and for that of general hospitals, will be far greater

than it is now. What may be done for the comfort of those who are considered hopelessly blind, but who yet, in a few instances, have some sight to be preserved and increased, certain of us have had occasion to see in watching the practice of a Fellow of this Academy, who is one of the surgeons having the care of the eyes of the inmates of our Blind Asylum. The wisdom which provides special attendance even for the almost sightless eyes of the inmates of the schools for those who are educated without the aid of vision, will finally be imitated not only in all colleges for the blind, but in those for the deaf and dumb. In the latter-named places about one-half the inmates are there from causes that occurred after birth. In very many of these cases the disease that caused the deafness still exists, and shows itself in various ways; and yet these hospitals, for hospitals they truly are, much as the name may be disliked, usually have only physicians to attend the acute cases of general disease, while the suppurating ears and swollen throats are neglected.

Our great hospitals are usually supposed to be wholly in the care of the profession, and they are held responsible by the average public for their faults, while the credit is usually given to them for their beneficial results. Yet, as a rule, the profession is only responsible for the direction of the positively medical treatment. They have nothing to say, except in the way of advice, as to the location, general management, the quality of the supplies, and so forth, upon which so much of the efficiency of hospitals depends. Almost the only hospitals in the country, for whose sanitary condition physicians are completely responsible, are those under the control of the Medical Departments of the Army and Navy. These hospitals, during our late civil war, when they were upon a scale seldom equaled in any country, were entirely under the management of medical men. There was no added financial wisdom from gentlemen learned in commercial pursuits. The record of these hospitals is certainly one of which a nation may be proud, for they have become models for the world. In them the medical profession not only exhibited its skill, but also

indicated its ability to assume the control of its own affairs. In spite of the lessons thus taught, many of our large hospitals are still controlled by Boards of Managers, none of whom are physicians. Yet it seems evident that the layman who gives or provides the money, and the physicians who oversee the medical work, should sit side by side in the committee-room, and together direct and control the great object of their labors.

Our profession, by accepting a system which excludes them from the directorships of hospitals, has lost one of its best opportunities for influencing the mind of a generous and educated laity. The day has long since passed away, even in the country whence we obtained our notions on this subject, when there is any thing like the relation of patron between the director and physician of a hospital. The relation may possibly have existed in the time of fulsome dedicatory epistles from authors to noblemen, or when Dr. Johnson waited in the anteroom of Lord Chesterfield, but no one thinks of such a one now. The full recognition of the true relations will be experienced by the coming medical man when in all our great establishments for the care of the sick he sits down with his brother philanthropist to look into the affairs which they together control.

III. In discussing the relations of the medical man to the State, we are very likely to think first of the regulation by the government of the qualifications for the practice of his profession. As matters now stand, any person who chooses may practise medicine. It is true that a law was passed by the last Legislature of our State, which prohibits any one from practising who has neither a license from a county medical society nor a diploma from a medical college. This law bears on the face of it an attempt at the protection of the public from quackery. But, when we find that there are three county medical societies and five medical colleges in this city, and that only one of these societies, and three of these colleges, would be recognized as competent authorities in medical education by such bodies as the Royal College of Physicians of England, our notions as to the value of such protection from the State must materially change. When there are no sects in medi-

cine, and when the necessary qualifications of a physician are pretty well understood by our law-makers, it is probable that such laws may be of service, but it is hard to see how this legislation is any other than meddlesome, which will in no wise benefit those for whom it was ostensibly framed. As yet, it seems as if our ancient but ever-progressive profession must avoid entangling alliances with a state that has no proper conception of our position and claims. The evil of irregular practitioners and sects in medicine is founded in ignorance, and we must perhaps patiently await better sentiments among those who call themselves physicians, and the laity, before we can hope for such relations with the government as will elevate our own standard and protect the people. If this law be left on the statute-book, and enforced, it is probable that every one who has the least desire to practise medicine will be furnished with a license or a diploma, and thus the legal qualifications will be rendered perfect, but the actual fitness will remain the same. The coming medical man will live in a day when all diplomas will be valuable, when there will be no sects in medicine; then, perhaps, the State and our profession will be in closer alliance. There is, however, a kind of allegiance to the State, which we all fully recognize, that of giving voluntary service, which our education enables us to proffer; and we would not like to forget that, in becoming physicians, we do not cease to be citizens who are interested in all that pertains to the public weal.

The reader of our national history, especially of its details, as contained in its old journals and monographs, must be struck with the fact that there was a time, in New York City at least, when the physician appeared somewhat more as a citizen than he does now. There was not quite so much of the class-feeling which separated the medical man from his fellow as now. Some of the causes which have produced this state of things are unavoidable in the growth of a great city, the change in the character of medical studies, the general dislike to mix with affairs that have any tinge of mere party politics in them, and so forth; but it is greatly to be regretted

that the profession has not of late developed more men with very decided social and (in the high sense) political influence. However learned and scientific we may become, and to be such a profession is undoubtedly our chief aim, we are still in this country, of all the countries of the world, citizens, responsible to the State. When so much of the legislation of the country must of necessity be turned, in these latter and in the coming days, toward sanitary affairs, the profession of medicine may well inquire whether we may not have duties in the matter of instructing that legislation. In no way can that be done so well as by a representative and experienced medical man, having the confidence of his peers, who shall give a turn to all the questions that affect the public health in such a manner that our legislation may reflect the best medical science of the State. We cannot believe that the coming medical man can ever be a partisan, but there are higher politics in which he will, perhaps, take much more part than the physician is now able to do. The English profession live in a much older civilization than ours, and they are becoming very strenuous for more thorough medical representation in the cabinet and Legislature. Our needs are certain to be, if they are not already, the same as those of the country from which we in such large measure spring. Is it not probable that there will be one day a bureau or department of sanitary science, where now is rapidly forming one of the best of pathological museums and one of the largest of medical libraries?

There are quite often questions arising in medical jurisprudence that would be better settled by medical jurors than any other. Such a one was the famous trial that lately agitated the empire of Great Britain, when an impostor laid claim to an enormous estate by claiming to be a man to whom he had very little physical resemblance. Thousands of pounds were expended, a great popular ferment was caused, a jury was kept from their ordinary pursuits in life for an almost unparalleled period of time, in the discussion of questions of identity that ought to have been settled by experts. As suggested by the English medical authorities (Guy and Ferrier),<sup>1</sup> a

<sup>1</sup> *London Medical Times and Gazette*, October 31, 1874.

preliminary examination of the body of the claimant would have soon determined whether it was possibly that of Roger Tichborne. There was only a period of twelve years between the time of the supposed death of the eccentric baronet and the appearance of the pretender, and, as he was twenty-five years old when last seen, it would certainly have been possible for a medical commission to have soon settled a question of identity.

We may congratulate ourselves that the disposition to seek the aid of medical experts is every day becoming more pronounced, and that in this respect also our functions will certainly be greatly enlarged.

In concluding this prolix sketch of what we may hope will be some of the enlarged duties of the medical man of the future, I may perhaps be pardoned for a brief reference to what our profession has done for the State outside of the direct line of duty. I speak not of mere tyros in medicine, who have hastily shaken off the cares of one calling to assume another, or of those who bore the title of doctor as an honorary one, while their chief interests were in another direction than that of the care of the sick; but of those who, after giving years of successful work to the every-day duties of their calling, turned aside from the watching of fevers and the adjustment of fractures, and, like Cincinnatus and Putnam, left the implements of labor, where they were found by the messenger who came to call them to their country's aid.

Among the signers of the Declaration that led to our becoming an independent nation, and also among the active members of the first Continental Congress, is found the name of Benjamin Rush, one still honored and quoted wherever medical science is studied. At Princeton, in the struggle about Nassau Hall, General Hugh Mercer, who had already won honor and fame as a practitioner of medicine, fell in battle. It was a physician also, and one who was the progenitor of a line of distinguished surgeons, who led our forefathers at Bunker Hill. In the direct line of duty, in the great contest through which our country has lately passed, there were hundreds of medical men, who endured all the



hardships of camp, and all the dangers of the battle-field, by the side of their brethren of the line, with no idea of the rewards that were the hope of those who served their country under no greater danger and with no more devotion.

We may hope, however, that these occasions for service to the State are passed forever, and that we shall never be called from the sick-room, the laboratory, and the hospital-ward, to any other duties to it, than the regulation and management of the sanitary work of the government. Yet we may claim that, in all relations, our profession has deserved well of the republic, and I believe we may look forward to a day when the duties of the physician to his individual patients, to the public at large, and to the State, will be performed under better facilities, and with greater appreciation and success—to a time when a higher position, as one of the educated and responsible classes, will be taken by the medical man.

PROCEEDINGS  
OF THE  
NEW YORK  
ACADEMY OF MEDICINE,

*At the First Stated Meeting, held in the Hall of the Academy,  
12 West Thirty-first Street, May 20, 1875.*



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1875.



# NEW YORK ACADEMY OF MEDICINE.

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GOUVERNEUR M. SMITH, M. D.,	EDWARD H. JANES, M. D.,
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EDMUND R. PEASLEE, M. D.	

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JAMES R. LEAMING, M. D.,	WILLARD PARKER, JR., M. D.

### *Committee on Building.*

EDMUND R. PEASLEE, M. D.,	SAMUEL S. PURPLE, M. D.
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## NEW YORK ACADEMY OF MEDICINE.

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THE New York Academy of Medicine was instituted on the 6th day of January, 1847, and was incorporated by a special act of the Legislature of the State of New York on the 23d day of June, 1851. The objects contemplated in its organization, as declared at the time, were—1. The separation of regular from irregular practitioners in medicine. 2. The association of the profession proper for purposes of mutual recognition and friendship. 3. The promotion of the character, interests, and honor of the fraternity, by maintaining the union and harmony of the regular profession in the city and its vicinity, and aiming to elevate the standard of medical education. 4. The cultivation and advancement of the science, by united exertions for mutual improvement, and by contributions to medical literature. 5. The procurement of a building or hall where meetings of the Academy may be held, where a library can be gathered, and where the profession may meet on common ground. These efforts have culminated in the purchase of a commodious building, centrally located on Thirty-first Street, between Fifth Avenue and Broadway, which may, for some time to come, answer the purposes of the Academy and the profession, and will be open daily (Sundays excepted) from 9 A. M. to 9 P. M. during the entire year. It now remains for the individual members of the medical profession proper, of this city, to use the advantages which are at their command, to advance its honor and best interests.

The exercises, on the occasion of the second stated meeting of the Academy in May last, will long be regarded as memo-

nable in its history. On that evening the building now owned by the Academy was, for the first time, occupied by this body, and the donations then received, and the interest then excited, are described in the following

#### PROCEEDINGS :

A stated meeting of the New York Academy of Medicine was held in the Hall of the Academy, No. 12 West Thirty-first Street, on Thursday evening, May 20, 1875, at eight o'clock,

DR. SAMUEL S. PURPLE, *President, in the chair.*

The minutes of the last stated meeting were read and approved. The President then addressed the Academy as follows :

*Fellows of the New York Academy of Medicine.*

It affords me sincere pleasure to congratulate you on this auspicious occasion, to welcome you to our own home, this new shrine of our one faith and common altar.

As men reckon time, a generation has not passed since this Institution, springing fresh from the necessities of the profession, started on its career of usefulness—a career which we trust is destined, in all respects, to keep pace with the wants of the profession.

Of the manner—the days of patient labor, and the moments of anxiety to some, which have brought about the result here presented to you to-night—it will better become others to speak. Suffice it for me to say that it has been deemed proper, as a part of the exercises of this evening, that the formal surrender of this building and lot of ground should be made to the Trustees of this Academy, and that your Committee on Ways and Means should present to you a preliminary account of their stewardship, and at the same time indicate such measures as, in their judgment, may be required to enable this body to anticipate, and properly meet, the unceasingly growing wants of the profession, in this great city.

Dr. James Anderson, the chairman of that committee, will now address you.

*Mr. President, and Fellows of the New York Academy of Medicine.*

GENTLEMEN: I am directed, by your Committee on Ways and Means for procuring a hall and home for the Academy, to present to you this evening their report. It affords me, as chairman, great pleasure to comply, and place in your hands the following documents and papers as evidence of the completion of a part of the work required.

Mr. President, what I shall now say may be a repetition, in part, of my remarks, January, 1867, in taking leave of the chair which you at present occupy with so much dignity. I propose to present a retrospect of some of the early incidents connected with the incipency of the plan, the matured results of which we are to-night enjoying.

At a meeting of the profession, called by a committee consisting of the late Drs. A. H. Stevens, Valentine Mott, and Isaac Wood (representing the College of Physicians and Surgeons of New York, the Medical Department of the University of the City of New York, and the Medical Society of the County of New York), held December 12, 1846, in the Hall of the New York Lyceum of Natural History, 561 Broadway, Dr. John Stearns presiding, and F. Campbell Stewart acting as secretary, Dr. Mott, in an earnest address, stated the object and purpose of the meeting, which was, to promote that harmony and good-will in the profession so essential to its advancement, and the elevation of professional character. He was followed by Dr. Stevens, who, after pursuing a like train of thought, moved the reading of certain resolutions, from which the following are extracts:

*Resolved*, That it is expedient to procure a building, to be devoted to the Academy of Medicine, and that shall also be known as a hall in which the regular members of the profession may meet on common ground.

*Resolved*, That a subscription be now commenced for this purpose.



Dr. Stevens further expressed the hope that the increasing unanimity of the corps would soon lead to the establishment of a medical hall, unconnected with hospitals or colleges, which should contain meeting-rooms, a library, and be a headquarters of resort, both for ourselves and our brethren from abroad. Dr. John Watson, on the same evening, said that "the imperfect action of the medical body depended upon the want of a proper place of meeting. If the profession would all set to work, we should soon have an ornamental and useful one. He hoped the time was not far distant when the medical clubs would come together; if so, the profession would be organized, and we should be subject to no reproach from strangers." Such were the sentiments which found utterance during the initial stage of the formation of this Academy.

May I, in passing, be pardoned for quoting, from my address to you in 1867, sentiments of a similar character: "The great duty now resting upon us is, that we secure a site and erect a building thereon, that shall not only be an ornament to the city, but an honor to the Academy and the profession—a great medical centre, that shall be both attractive and scientific. To secure this imperative necessity, a home, it is essential that there should be a more concentrated *esprit de corps*, that shall develop the irresistible power of union. Let us with one accord respond to the duty devolved upon us, and this object will be accomplished. We have associated in the Academy the power and influence of the medical profession in this city. We number upward of three hundred living Fellows, besides having enrolled, on the list of our departed, names of some of the most distinguished men of any country, who have gone to give an account of their stewardship. But, gentlemen, we have reason to rejoice that we still have so many among us of high scientific attainments, with the bright sons of the profession coming into notice, and promising much for the future."

Gentlemen, the results which it is our pleasure to present to you to-night prove that our confidence and hope were not

misplaced. I will now give a detailed statement of the means by which this end has been attained.

February 3, 1847, Dr. Mott presented the following resolution, which, however, he did not wish to be then acted upon, inasmuch as the hour was already advanced, and the subject demanded consideration.

*Resolved*, That a committee of — be appointed to present a plan for raising funds for the erection of a medical hall, and it be instructed to report at the next stated meeting of the Academy.

On motion of Dr. Robert Watts, the consideration of this resolution was ordered to be postponed to an adjourned meeting, to be held the following week.

At the adjourned meeting, held February 10, 1847, on motion of Dr. Griscom, it was decided that the committee should consist of five members, and the following gentlemen were appointed: Drs. Mott, Stevens, Cameron, Drake, and Berger. Of the final action of this committee no record exists.

Subsequently to these meetings, there was an interval of nearly ten years, when at a stated meeting of the Academy, held May 7, 1856, Dr. Willard Parker in the chair, resolutions were adopted for the organization of a committee to carry into effect so much of the recommendations contained in the President's (Dr. Parker's) address as related to a hall for the Academy. Said committee, consisting of E. L. Beadle, J. W. G. Clements, Wm. Detmold, and S. Conant Foster, reported to the Academy, September 3, 1856, a plan which was adopted at the stated meeting held October 1, 1856, and fifteen Fellows were nominated, from which five should be elected to compose the building committee, and whose duty it should be to carry into effect the plan proposed. At the regular meeting, held November 5, 1856, the election of this committee was indefinitely postponed. Then followed another abortive decade. In April, 1866, the following communication was received: "At a meeting of the Council, held April 26, 1866, on motion of Dr. Jas. Anderson, it was voted that the Council recommend to the Academy the appointment of a committee

to consider a report upon the expediency of immediate action, in reference to a building. This recommendation was adopted by the Academy, and the following committee appointed, consisting of Drs. Willard Parker, Wm. H. Van Buren, I. E. Taylor, S. T. Hubbard, and Charles Henschel. These gentlemen, on the 19th of September, 1866, reported that it was inexpedient with the means at command to take immediate action in the matter. The committee was discharged, and the matter referred back to the Council for further consideration.

A second communication from the Council was received by the Academy, at a stated meeting held November 7, 1866, containing the following resolution:

*Resolved*, That the Council recommend to the Academy that it should appoint a Committee on Ways and Means, to adopt and prosecute a method for securing funds for the purchase of a site and the erection of a building.

This resolution was adopted and the following appointments were made: Drs. Willard Parker, Jared Linsly, S. T. Hubbard, Ernst Krackowizer, S. S. Purple, to which the name of the President, James Anderson, was added. This committee was organized at the house of Dr. Willard Parker, by the election of Dr. Jas. Anderson as chairman, and Dr. Samuel S. Purple as Secretary. Subsequently to the committee were added Dr. Chauncy L. Mitchell, Stephen Smith, John G. Adams, and Gouverneur M. Smith. Shortly after their organization the committee issued a circular to the Fellows of the Academy in the form of an appeal, to which they received no encouragement.

Recognizing the importance of the object for which they were appointed, your committee endeavored to accomplish a certain basis for future action. Not having succeeded, they, after considerable loss of time, resolved to try the plan of personal application in the prosecution of their work, themselves heading the subscription-list. The efforts of the committee were usually kindly received, and in many cases cheerfully responded to. The funds collected were deposited in the New York Life Insurance & Trust Company and savings-banks.

The total amount received to March 12, 1875, amounted to \$12,838, which, with the accumulated interest of \$1,800.22, made a total of \$14,638.22. On December 24, 1874, the Subcommittee on Ways and Means purchased the house and lot No. 12 West Thirty-first Street, New York, in the name of the New York Academy of Medicine, for the sum of \$42,500. Payments have been as follows: contract of purchase, \$1,500—the balance on the delivery of the title-deed, March 12, 1875, the Academy, February 4, 1875, assuming the mortgage of \$10,000 on the property. To enable your committee to make the above payments they received from the Board of Trustees, by order of the Academy, the sum of \$17,350.27, leaving a balance in the treasury of the committee of \$633.55, out of which \$329 were paid as attorney's fees. Subscriptions received subsequently to March 12, 1875, have enabled your committee to pay the interest (\$350) on the bond of \$10,000 due April 14, 1875; also the premium of \$21.25, on an insurance of \$10,000, in two companies, of \$5,000 each. The funds now in the treasury (May 20, 1875) will meet the bills for payment of carpets, cleaning and renovating the premises, leaving the payments for furniture, carpentering, painting, mason-work, etc., amounting to about \$1,000, to be provided for within three months.

Having thus far complied with the directions of the committee in this general statement, I now, Mr. President, present to you by the order of the Academy, and in the name of your committee, the abstract of title and deed of the house and lot No. 12 West Thirty-first Street, New York, together with some minor papers and the two policies of insurance. I do this with profound gratitude to God, a feeling I am sure that will meet with a prompt response from all, ever remembering that, "except the Lord build the house, they labor in vain who build it."

All of which is most respectfully submitted.

On closing the reading of the report, the deed of the property, the abstract of the title, the policies of insurance, and



tion of Dr. Erastus Sergeant, of Stockbridge, then one of the most distinguished physicians and surgeons of Massachusetts.

In 1792-'93, he attended lectures in the University of Pennsylvania, when the Faculty consisted of Shippen, Wistar, Kuhn, Rush, Hutchinson, Griffiths, and Barton, who made up a corps of unusual ability and intellectual power.

Upon his return from Philadelphia in 1793, he entered at once upon the active and successful practice of his profession, taking up his residence at Half-Moon Point, now Waterford, Saratoga County, New York. It was while here, and much after the manner that Jenner acquired his first idea of the protective power of *vaccinæ*, that he learned of and carefully investigated the parturient properties of ergot.

Commenting upon this fact, a distinguished professor, the late Dr. John B. Beck, in 1836, says: "I have always thought that his merits have not been sufficiently appreciated by his contemporaries, having no doubt that he who rescued ergot from empiricism and investigated its medicinal effects, so as to make it a regular article of the *materia medica*, is justly entitled to have his name enrolled by the side of the Parés, the Harveys, and Jenners of the Old World."

It was here in the course of his practice that he was called to attend Miss Sally Ketchum, daughter of Colonel Hezekiah and Mary Ketchum (a merchant and one of the first settlers of the town after the war of the Revolution), who was believed to be fast sinking under the blighting influence of that fell destroyer, consumption. Faithful and assiduous in his attentions, his remedial measures soon restored her to health, and the young physician received the hand of his patient as his bride, on the 17th of June, 1797. The fruit of the union was five sons and one daughter.

On the 7th of November, 1805, Dr. Stearns, with Drs. William Patrick and Grant Powell, having been appointed a committee by the physicians of Saratoga County convened at Ballston Spa, upon that day, issued a call to their professional brethren of Washington and Montgomery Counties, recommending to their "earnest attention the necessity of adopting

some vigorous measures for the suppression of empiricism and the encouragement of regular practitioners," and procuring "from the Legislature of the State their sanction to a Medical Society"—at the same time requesting their attendance at Ballston on the 16th of January, 1806, "for the purpose of adopting the best means for obtaining an act of incorporation."

The proceedings of this meeting, and subsequent action of the profession, in which Dr. Stearns bore a most prominent and active part, eventuated in the passage of the act of the Legislature of April 4, 1806, under which, in less than three months, twenty medical societies, in as many counties, were organized, followed by the organization of the Medical Society of the State of New York, the next February, thus giving to the profession of medicine that honorable status in the Commonwealth to which it was justly entitled.

In January, 1810, he took his seat in the State Senate as senator from Saratoga County, serving in that capacity for four years, during which time he labored zealously to promote the interests of the Medical Society, and through that the best interests of the profession in the State.

Among his compeers were De Witt Clinton, Livingston, Selden, Bloodgood, Phelps, McLean, Haight, Root, Martin Van Buren, afterward President of the United States, Townsend, and others; and on occasions, when the Senate was resolved into a Committee of the Whole, he was usually called to preside over its deliberations. His admirable qualities as a presiding officer are well remembered by the few that remain of the organizing members of this Academy, and were evinced in his thorough knowledge of parliamentary rules, ready tact, sound judgment, even discrimination, and impartial action, thus rendering himself extremely popular in the chair.

In 1812 the Medical Society of the State elected him an honorary member of its body, and the same year, the Regents of the University recommending, the College of Physicians and Surgeons in the City of New York conferred upon him the honorary degree of M. D. He was the first Secretary



of the State Medical Society; and its sixth President in 1817, and filled that office for four successive years.

His contributions to the literature of medicine and the collateral sciences were varied and voluminous. In his addresses and other papers, whenever his theme would permit, he took pleasure in giving public utterance to those expressions of religious zeal and pious emotion which in a marked degree characterized his professional and private conduct, and which so much endeared him to his friends and medical brethren. He was one of the founders of the American Tract Society, and for eleven years until his death the chairman of its finance committee, and for more than twenty years a member of the vestry of St. George's Church, of this city.

From 1810 to 1819, Dr. Stearns resided at Albany, removing in the latter year to the city of New York, chiefly under the strong solicitation of Governor Daniel D. Tompkins. He died here March 18, 1848, aged seventy-eight years, of septicæmia, the result of a punctured wound accidentally received in the prosecution of professional duty.

Of other main incidents in his long and useful life, the time will not permit me to speak. I see present some who were his contemporaries, and who doubtless can well remember how he inspired in the minds of his professional brethren a deep sense of conscious integrity of character, and how readily he commanded confidence and support by the energy and vigor of his efforts to elevate the standard of the medical profession, both in the State and city of New York. You will remember, too, how earnest he was in promoting the objects for which this Academy was founded, declaring in the first year of its existence that, could he be assured of its "uninterrupted and enduring prosperity, in disseminating health, happiness, and the sustaining principles of life," he would "die in peace, with effusions of gratitude and praise to Almighty God for his permanent blessings upon our labors."

He was eminently practical; his professional probity was intuitively great; naturally reserved, he waited for, rather than sought, professional honors; finally he crowned the vir-

tues of a well-ordered life, with the duties and pure faith of an exemplary Christian :

“ When to the common rest that crowns our days,  
 Called in the eve of life, the good man goes,  
 . . . . and, ripe in wisdom, lays  
 His silver temples in their last repose,  
 We think on what he was—his stainless worth,  
 . . . . and in the book of fame  
 The glorious record of his virtues write.”

The resolution of Dr. Foster was then unanimously adopted.

Dr. Gurdon Buck offered the following resolution, which was unanimously adopted :

*Resolved*, That the thanks of the New York Academy of Medicine are hereby tendered to Mrs. Mary K. Little, and Hon. Galen A. Carter, for the portrait of their father, the late Galen Carter, M. D., a former Vice-President, and founder of this Academy, so kindly donated by them, and that the Secretary be directed to transmit to them a copy of this resolution.

Dr. Alfred C. Post, on seconding the resolution of thanks for the portrait of the late Dr. Galen Carter, a former Vice-President of the Academy, spoke as follows :

**MR. PRESIDENT:** I take pleasure in seconding the resolution which has been offered by Dr. Buck.

The portrait which has been so generously presented to the Academy recalls the venerable features of our late friend and Fellow, Dr. Galen Carter. His tall and erect form was remarkably in unison with the mental and moral characteristics by which he was distinguished. He might with singular propriety be described in the words of the Roman poet, as “*integer vitæ, scelerisque purus.*” In all his professional and social relations, he maintained a character for truth, and honor, and inflexible integrity. The son of a physician, he early imbibed a love for the profession to which he so assiduously devoted himself, to the close of a long and useful life. He was engaged in the active duties of his profession, visiting



the sick, when suddenly the summons came which called him away from earth, to give an account of the deeds done in the body. The call was sudden, but not unprepared for.

“The web of life was spun,  
The work of earth was done,  
The prize of heaven was won.”

He, being dead, yet speaketh to us, through the portrait which is henceforth to grace these walls, and the words which he speaks to us are these: “Be ye also ready, for, in such an hour as ye think not, the Son of Man cometh.”

The Secretary then read the following letter:

NEW YORK, *May 19, 1875.*

SAMUEL S. PURPLE, M. D., *President New York Academy of Medicine.*

DEAR SIR: I take great pleasure in presenting through you, to the New York Academy of Medicine, a portrait of my father, the late Dr. Joseph Mather Smith, who was one of the founders of the society, and in 1854 its President.

The portrait has been painted expressly for the Academy, for presentation on the occasion of the inauguration of its new building on the 20th inst. Wishing the Academy even greater prosperity than it has ever before enjoyed,

I am, sir, very respectfully yours,

GOUVERNEUR M. SMITH, M. D.

14 East Seventeenth Street.

Dr. Willard Parker offered the following resolution, which was unanimously adopted:

*Resolved*, That the thanks of the New York Academy of Medicine are hereby tendered to Dr. Gouverneur M. Smith for the portrait of his father, the late Dr. Joseph Mather Smith, President of this Academy in 1854, so generously presented by him, and that the Secretary be directed to transmit to him a copy of this resolution.

Dr. Elisha Harris, in seconding the above resolution, remarked as follows:

MR. PRESIDENT: With the mention of this name, revered by all with undying reminiscences of the noble character and exalted labors of his life, how natural this beautiful portrait of Dr. Joseph Mather Smith appears! How complacently his countenance seems this evening to look upon those who now gaze at that shadow of the honored teacher and model counselor in medicine!

Reposing and thoughtful, expressive yet placid, well knit with firm and steady purposes, observing and inquisitive, yet with every feature of judicially patient and balanced judgment, how true to nature that countenance and the *pose* of the picture!

The warmth, too, which the artist has given to his subject on this canvas, belongs to it. Prof. Joseph Mather Smith had the hearty warmth and earnestness of a physician devoutly fond of his professional pursuits, and profoundly interested in the development of scientific truth; and such were his true sympathies with his brethren, and his concern for human welfare, that his dignity and apparent reserve were surrounded and illuminated by a halo that imparted a most genial quality to his judicial bearing. The artist has environed his subject with an atmosphere that makes the picture seem to be in our presence *alive*, and in a sense really the semblance of one with us, listening and speaking to us: and such was Prof. Smith when among his brethren, and when the honored President of this Academy—for he thought, felt, and earnestly concerned himself with his brethren and his fellow-men.

To the thoughtful, the filial, and professional affection of the son—our honored fellow-member—who has to-night presented this beautiful and life-like portrait of his noble father, the teacher and patriarch in medicine, we owe the sincere tribute of thanks.

Let the halls and libraries of the Academy perpetuate the memory and labors of all such noble examples of professional duty and well-spent life. Dr. Joseph Mather Smith was for nearly fifty years an earnest and progressive student and contributor in medical science; forty-six years a public teacher

and a clinical expounder of practical medicine. He was the friend and supporter of all who made new advances in medical and physiological science. Yet it was not alone his own varied and well-digested scientific and literary acquisition nor his truly rare logical and analytical mind which gave him all the pre-eminence he enjoyed; indeed, he boasted of nothing, but, even when his masterly medically prophetic discourse on the nature and probable advent of the Asiatic cholera was pronounced in the spring of 1832, he turned aside to mention that for the careful translations from Italian and other authors, who were then describing the disease, he acknowledged the aid of his wife; and, on another occasion, he also took pains to credit the aid received from his son, Dr. Gouverneur M. Smith.

It was plain that upon his whole nature the mark of true nobility was set. The first paragraph that his pupil, now speaking, penciled in memorandum from the lips of that teacher, seems, after many years, to apply in a special manner to the good physician and revered counselor himself. He said: ". . . Nothing is more observable than the fact that some individuals exercise a vastly greater influence over their fellow-men than others. Such a moral power, varying in degree, is seen in action on every side; and everywhere its agency is productive of good or evil. . . . When it exists as a vigorous principle in the character of a physician, it gives him an influence, as a practitioner, which no amount of simple medical learning can bestow."

Worthily, reverently, and with sincere affection do this Academy and the good and great among citizens of this metropolis pay the tribute of honor to him whose portrait we now receive at the generous hands of the son and family of this honored and beloved ex-President to adorn these scientific chambers; and, wreathed about groups of such memorial pictures will the Fellows of the Academy inscribe, in golden letters, "*Hæc mea ornamenta sunt.*"

The Secretary read the following letter from Dr. C. D. Smith:

NEW YORK, May 19, 1875.

DR. PURPLE, *President of the New York Academy of Medicine.*

DEAR SIR: I beg through you to present to the New York Academy of Medicine the portrait of my father, Dr. Gilbert Smith. His family will be proud and happy to have it occupy a place upon your walls, in company with the likenesses of the distinguished men who were associated with him as founders of the Academy.

Very truly yours,

CHARLES D. SMITH.

Dr. Post then moved the following resolution, which was unanimously adopted:

*Resolved*, That the thanks of the New York Academy of Medicine are hereby tendered to Dr. Charles D. Smith for the portrait of his father, the late Dr. Gilbert Smith, one of the originators of this Academy, so generously presented by him, and that the Secretary be directed to transmit to him a copy of this resolution.

Dr. John G. Adams, in seconding the resolution, made the following remarks:

MR. PRESIDENT: I take pleasure in seconding the resolution. I had the pleasure of a long, intimate acquaintance with Dr. Gilbert Smith; my recollection of him is very exact and agreeable. I honored him for his strict integrity, his large-hearted liberality; there was nothing sordid or envious in his character; he rejoiced heartily in the success of others, and, when he had become one of the Nestors of our profession, his ready sympathy, his cheering encouragement to his younger brethren, increased the influence of his sterling qualities.

When I first knew Dr. Smith, in 1826, he was in the enjoyment of a large and lucrative practice; Drs. Hosack, Mott, Francis, Stevens, Bliss, Cheesman, Moore, and others, were the magnates of that day, and Dr. Smith was an esteemed *confrère*. Many years since, he served as physician to the old

Almshouse, on the Chambers Street side of the City-Hall Park, and in 1832, on the first invasion of cholera, he was appointed one of the *Medical Council* of eight physicians, and served faithfully during that memorable period.

He was an ardent friend of this Academy, and signed his name to our Constitution after Dr. Stearns, thus heading the list. He was remarkable for a commanding presence no less than for the amenity of his deportment; he maintained an honorable position among his brethren during the period of half a century. It is therefore, Mr. President, most fitting that his portrait should occupy a place on our walls, in perpetual remembrance of his early devotion to its interests. May his example stimulate us to virtue!

Our late Fellow, Dr. J. A. Swett, in his memoir of Dr. Smith, closes in these words: "A pleasant satisfaction must ever accompany the recollection of his noble qualities—of his long and useful life—his peaceful and happy death."

The Secretary read the following letter from Dr. John G. Adams, Corresponding Secretary:

NO. 12 FIFTH AVENUE, NEW YORK, }  
THURSDAY, May 20, 1875. }

S. S. PURPLE, M. D.

DEAR SIR: Please to accept for the Academy the busts of those ancient masters of our art, *Æsculapius* and *Hippocrates*. Give them a resting-place among our "*lares et penates*," and let them be handed down to posterity in commemoration of this auspicious inauguration.

Very respectfully yours,

JOHN G. ADAMS, M. D.

On motion of Dr. John P. Garrish, it was—

*Resolved*, That the thanks of the Academy be tendered to Dr. Adams for his donation of the busts of *Æsculapius* and *Hippocrates*.

The President announced the reception of the following letter from Prof. Austin Flint:

NEW YORK, *May 20, 1875.*

DEAR PURPLE: I cannot adequately express how greatly I am disappointed in not being able to be present this evening on the occasion of the Academy taking formal possession of its Home. Will you accept for yourself the assurance, and kindly assure, on my behalf, the Fellows who may be present, that I shall be at the meeting in spirit, although unavoidably absent in person? The circumstances preventing my attendance were beyond my control, but I claim the privilege of imposing on myself, for my absence, a fine, which I herewith inclose.

If some of our wealthy brethren would insist on completing our building by the erection of an extension in accordance with their own ideas, please give my little contribution any other direction. If, however, this be not the case, I hope the small sum may prove the germinal beginning of developments which will be sufficient for our needs, recollecting the adage, "Great oaks from little acorns grow."

A minor cause of regret in not being with you to-night is the loss of hearing the "three cheers and tiger" which, as the Chairman of the Committee on Ways and Means has assured me, the occasion will call forth. I do not doubt that Dr. Anderson's voice and vigor will render the "cheers" effective, and I am sorry that the absence of our honored Fellow, Dr. Peaslee, will prevent him from leading off with the "tiger."

With my warmest sympathy in the objects of the meeting, and my best wishes,

I am most truly yours,

AUSTIN FLINT.

Dr. R. A. Barry at this stage of the proceedings proposed three cheers for the success of the Academy, which were heartily given; after which—

Dr. William Detmold, being called upon by the President, gave an account of the origin of the building-fund, as follows:

MR. PRESIDENT: I do not know why I should be called upon to say any thing on this interesting occasion unless it is because



I belong to a class of men which I regret to say is rapidly becoming extinct. Do not accuse me yet of presumption when I say this, for I merely mean to state that I am one of the original members and founders of this Academy, the number of whom has been reduced by death to some twenty-eight or thirty. I well remember when the meetings of this Academy were held in a dingy room over a coal-yard, I think somewhere in Wooster Street near Houston; and I may also say that, as far as my recollection serves me, the academical discussions of those days bear to the discussions of the present day about the same proportion which that dingy room bears to the elegant hall in which we are assembled to-night. Mr. President, will you permit me to indulge in a few reminiscences which may not be entirely out of place or without interest on this occasion? When, in 1853, the American Medical Association was to meet in New York, it became, of course, necessary to collect funds to receive and entertain the profession of the United States in New York in a manner worthy of New York. The profession of the city came forward in so liberal a manner that after handsomely entertaining the Association and defraying all expenses a large surplus remained in the hands of the committee of arrangements, *quorum pars parva fui*, that is, I was a member of that committee. Of course, the question arose, what should be done with the surplus? A powerful party in the committee was in favor of giving it to the "Society for the Relief of Widows and Orphans of Medical Men;" and the charitable and benevolent spirit so characteristic of our profession was about to carry that measure *nem. con.* Although I took a lively interest in that institution, the same as I have done ever since and do now, I objected. It did not appear to me to be fair to give money contributed by the whole profession to a society which was very limited in the number of its members, and which was neutral in its beneficent character. It appeared to me more legitimate to turn the money into a channel which would benefit the whole profession which had contributed it; I therefore, then and there moved to hand the surplus over to

the Academy of Medicine as a nucleus for a building-fund. My argument prevailed, and a circular was issued to all the contributors recommending that measure, leaving, however, to each contributor the right either to demand his proportion of the money back again, or to direct any other disposal of it that he might prefer. Only one of the larger contributors demanded and received his money back; two or three of the smaller ones directed theirs to be given to the widows and orphans; the rest approved of the recommendation of the committee, who handed over to the Academy about \$2,500 as a nucleus of a building-fund. Thus the first seed was sown from which we reap to-night so rich a fruit, and it only remains to me to congratulate you, Mr. President and the whole Academy, for the prudent and successful management which made such a result possible. But, Mr. President, the same act looked some twenty-odd years ago upon the coal-yard hall merely as a starting-point; so too, we look upon this hall, elegant as it is, merely as a fresh starting-point, a new departure; for I hope, nay, I feel sure that not a few of the Fellows assembled here to-night will live to see the time when they will look back to this hall with that same proud pity that I have just shown to the poor primitive coal-yard hall or hole; for surely the time cannot be far distant when this Academy will have an appropriate fire-proof building with all the necessary appliances worthy of the profession and of the Empire City of the New World. All that is requisite will be to point in a plain manner to the gratuitous services which this city receives from the profession, and the direct advantages this city derives from every forward step of the profession, and the community will aid the profession to obtain this object.

The President announced the possibility that through inadvertency some of the resident Fellows of the Academy may not have been called upon by the Committee on Ways and Means for a contribution, and stated that if such should be the case the opportunity was now offered them to subscribe.



Dr. Willard Parker then followed in some earnest and able remarks on the need of immediate action being taken to establish a sinking-fund for the liquidation of the debt incurred, and in a glowing and impressive argument showed the inevitable necessity of providing for the future increasing wants of the Academy. He closed by making an additional contribution to the building-fund.

Dr. Samuel T. Hubbard, first Vice-President, remarked that the increasing wants of the profession demanded continuous effort, that the present must prove but a stepping-stone to something better for the coming generation, and concluded a warm appeal, by extending an invitation to all present to partake of a collation which had been provided for the occasion.

On motion, the Academy then adjourned.

#### POSTSCRIPT.

The following letter was received too late to be read on the occasion :

POUGHKEEPSIE, *May 19, 1875.*

SAMUEL S. PURPLE, M. D.

MY DEAR DOCTOR: Please accept my thanks for your kind note of the 15th inst., cordially inviting me to be present on the occasion of the first meeting of the New York Academy of Medicine, in its own hall, on to-morrow evening.

A special meeting of the Managers of the Hudson River State Hospital for the Insane has been called for to-morrow, and duty seems to demand that I should attend; therefore, if I am not with you, you will understand the reason.

I shall rejoice with you, whether absent or present, for, many years ago, I became impressed with the very great importance of providing a home for the Academy, and labored for that end, assured that, whenever it should be attained, it would tend more than all else to rally the good men and true. It would also enlist their warmest sympathies, stimu-

late their laudable pride, evoke their abundant liberality, and bind them together in strong fraternal bonds. May it kindle in each one such a burning zeal for the elevation of our profession, in usefulness and honor, that every thing selfish, mercenary, and base, will be consumed !

I am glad that the foundation for all this is well laid, and am confident that the superstructure must follow, and that ultimately the hopes of the most sanguine among us will be fully realized.

Very truly yours,

EDW. L. BEADLE.



NEW YORK ACADEMY OF MEDICINE.

1873.

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## ADDRESSES.

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DR. AUSTIN FLINT'S VALEDICTORY.

DR. SAMUEL S. PURPLE'S INAUGURAL.



# NEW YORK ACADEMY OF MEDICINE.

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## OFFICERS FOR 1875.

### *President.*

SAMUEL S. PURPLE, M. D.

### *Vice-Presidents.*

SAMUEL T. HUBBARD, M. D.,  
JOHN C. DALTON, M. D.,  
GOUVERNEUR M. SMITH, M. D.

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AUSTIN FLINT, M. D.

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### *Librarian.*

JOHN H. HINTON, M. D.

### *Assistant Secretary.*

HORACE T. HANKS, M. D.

### *Statistical Secretary.*

ALLAN McL. HAMILTON, M. D.



# OBJECTS AND WORK;

*A VALEDICTORY ADDRESS DELIVERED BEFORE THE  
NEW YORK ACADEMY OF MEDICINE, JANUARY  
21, 1875, AT THE COLLEGE OF PHYSICIANS  
AND SURGEONS.*

BY  
AUSTIN FLINT, M. D.,  
RETIRING PRESIDENT OF THE ACADEMY.



NEW YORK:  
PRINTED FOR THE ACADEMY,  
D. APPLETON AND COMPANY, 549 & 551 BROADWAY.  
1875.





## VALEDICTORY ADDRESS.

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### FELLOWS OF THE NEW YORK ACADEMY OF MEDICINE:

Two years ago I received at your hands the great honor of an election to the office of President of the Academy. The term of office is ended, and there remains only to be performed the final act of formally retiring and giving place to my successor. This act I perform with great pleasure. In saying this, let me hasten to add that I do not say it because I have found the duties of the office either onerous or in any sense disagreeable. On the contrary, in endeavoring to discharge my official duties to the best of my ability, nothing has occurred to embarrass me, and I have met with nothing but kindness and coöperation. I retire with pleasure because, in the first place, I believe rotation in office to be appropriate and conducive to the interest of the Academy; and, in the second place, I give place to one who will bring zeal, experience, and wisdom to the performance of the duties which will devolve upon him.

On the biennial recurrence of a change of administration, the retiring officer naturally looks backward, and the incoming President looks forward. The occasion is a fitting one for both retrospections and anticipations. The study of the past is always instructive with reference to the future. Let me therefore briefly recount the circumstances and events which have characterized the history of the Academy during the last two years:

1. There has been entire harmony during this period. The proceedings at the stated meetings of the Academy, of

the Council, of the Board of Trustees, and the committees, have been not only harmonious, but characterized by unanimity in action and sentiment. The demon of discord has never gained entrance within the Academy; may this be as true in the future, as it is with reference to the past!

2. There has been a fair attendance at the meetings of the Academy. That there is room for progress in this direction must be admitted, and I trust that, two years hence, there will be ground for congratulation in this regard.

3. The reading of papers at the stated meetings has not been delayed by business which is irrelevant or of minor importance, and there has been no confusion in the arrangement of papers for the successive meetings. For this the Academy is in a great measure indebted to the parting counsels of my distinguished and esteemed predecessor in office.

4. It may be claimed in behalf of the papers which have been read during the last two years, that they have been able, instructive, and of that varied character which is desirable. For this the Academy is under obligations to those who have been willing in this way to work for its interests. I desire to state, in this connection, that applications to Fellows of the Academy for papers or discourses, have been in almost every instance made with success; and I avail myself of this occasion to tender thanks, both personally and as representing the Academy, to those to whom we are indebted for the interest and profit pertaining to our stated meetings during the last two years. To secure for these meetings the services of those to whom the Fellows of the Academy will be glad to listen, is the most important of the presidential duties. I have found it an easy duty, in consequence of the ready assent of all whose services were obtained.

5. A volume of the Transactions of the Academy, comprising nearly 400 pages, was issued during the last summer. For about three years prior to the issuing of this volume, the publication of papers by the Academy had been suspended. This volume contains a complete list of the names of all who have been connected with the Academy, as resident, non-resi-

dent, corresponding, and honorary Fellows, giving the dates of their election, together with a list of the officers from the institution of the Academy. Considerable matter is also now in print, in preparation for a second volume of the new series, which may be expected during the next summer. The Constitution and By-Laws have also been printed for the use of the Fellows. These publications, with the imprint of D. Appleton & Co., leave nothing to be desired in the way of typographical execution; and, as regards the contents of the Transactions, this volume will compare favorably with works of the same character, either here or abroad. The task of arranging the matter for publication, and seeing it through the press, has devolved upon a committee, of which your newly-elected President is the chairman. The services which in this capacity he has rendered during the last two years, have required much time and labor. I should do injustice alike to him, and to the occasion, if I failed to refer to this fact; the more so, because these services are performed, not publicly, but in private, and are not likely, therefore, to be fully appreciated by all. Moreover, the services call for experience, learning, judgment, and taste—requirements which the chairman of the committee has in an eminent degree. I feel that I discharge a duty to the Academy, when I tender in its behalf thanks for the devotion to its interests which he has in this way manifested.

6. Delay in the printing of papers heretofore has impaired, in no small measure, the value of the published Transactions of the Academy. Authors of papers, which had been prepared with care and labor, naturally desired that, within a reasonable period, they should appear in print; and the delay, sometimes for a long period, has led often to their having been furnished, by preference, to medical journals. Valuable contributions have for this reason never appeared in the Transactions of the Academy. The Council, recognizing this fact, have adopted a plan which, it is believed, will secure for the Transactions the publication of papers. This plan, which has now been in operation for several

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months, is to place the papers, provided they are in readiness, in the hands of the printer as soon as they have been acted upon by the Council, and to furnish to the authors at once the extra copies to which they are entitled, and any additional copies which they may desire. In this way the printed papers are speedily in circulation, and may appear in medical journals, with due credit to the Transactions of the Academy. This plan, it is to be hoped, will be continued; and it cannot but serve as an additional inducement for care and elaborateness in the preparation of papers which are to be contained in the yearly volume of Transactions. The contents of this volume, it is needless to say, should be of a character to do credit to the Academy; and, with reference to this subject, it is important that the Council exercise discretion and a certain amount of reserve in ordering the publication of papers. A due regard to this object makes it a delicate duty on the part of the President to apply for the preparation of papers; and it is certainly not an agreeable duty on the part of the Council to decide against their publication. The interests of the Academy and of medical literature, however, should be paramount to all other considerations; and an impartial, judicious discrimination in the selection of papers for publication is certainly desirable. Let it be regarded as an honor to be invited to read a paper at a stated meeting of the Academy, and a still greater honor, to have a paper accepted by the Council for publication.

7. Lastly, the crowning event of the period over which our retrospections extend is the purchase of a building for the uses of the Academy, and, as it is hoped also, for the advantage of the other medical associations of this city. The project of obtaining a building was coeval with the institution of the Academy. The accumulation of money for a building-fund was provided for in the By-Laws, which assign this duty to the Board of Trustees, acting under the sanction of the Council. Slowly accumulating, a building-fund had reached a considerable amount, and a Committee on Ways and Means, selected long ago, was authorized to take appropriate action



whenever it appeared practicable and judicious to do so. This committee, together with the Council, recently concluded that the time for action in the matter had arrived. There was no difference of opinion on this point. Their conclusion was sustained by the action of the Academy at a stated meeting, at which the matter was made the subject for special consideration, and to which all members of the profession were invited. The Committee on Ways and Means promptly acted in accordance with the views adopted, and a building has been purchased. Its situation, size, and construction, are regarded as well adapted to the wants of the Academy and of other associations. The medical profession of the city of New York has at length a local habitation, an abiding-place, a home! I shall not expatiate on this event; its importance will be sufficiently appreciated.

It will be a grand epoch in the history, not only of the Academy, but of the profession of the city and State. Congratulating you, Fellows of the Academy, and brethren of sister societies, on this event, let me, in their behalf, express to the Committee on Ways and Means approbation and gratitude. The labors of this committee, as well as the wisdom of their action, claim our hearty acknowledgment. The task of obtaining and collecting subscriptions for a public object is one which, however commendable, is not generally coveted; hence the greater merit in those who are willing to spend time, strength, and influence, in disinterested efforts for a common good. Of the members of this committee there are two whom, as I know, it will not be deemed by their associates an invidious distinction, if I designate as especially deserving of mention in connection with the building-fund. The names to which I refer are Samuel T. Hubbard and James Anderson, distinguished for successful efforts, the former in obtaining and the latter in collecting subscriptions. Let not the claims of other members of the committee on our gratitude be disparaged by the mention of these names. Let the names of all who have been active in this great and good work be suitably engrossed, so as not to be lost sight of by

those who are to come after us. To many, doubtless, it will seem that our present *home* is humble in comparison with an edifice more appropriate to our wishes and deserts; but, to my mind, it is a pleasant reflection that, such as it is, we have procured it; its possession involves no obligation to those who are not of our profession. Let the comfort and advantages which we hope to derive from it stimulate those who are to come after us to exchange it for a larger and grander home.

The anticipations which this occasion might suggest, belong more appropriately to my successor in office than to myself. I shall detain you with only a few remarks on a single suggestion. It is the desirableness of a meeting of the Academy on an evening of every week. I suggest this especially with a view to providing for a fuller discussion of topics presented in papers read at the stated meetings. As it now is, there can be but little discussion after a paper has been read. Assuming that the reading of a paper begins at half-past eight, and occupies from three-fourths of an hour to an hour, the time for discussion is limited to a very short period. Moreover, often the Fellows present at a meeting are not prepared to discuss the paper to which they have just listened. They need time for reflection, study, and investigation. The experience of the last two years has shown that the discussions which follow the reading of papers are, in general, unsatisfactory. It would be otherwise if there were, in the first place, more time to be devoted to discussions, and, in the second place, more time for preparation therefor. The plan which I would propose is for a meeting to be devoted to a paper, or to papers, and the discussion of the topics presented to be made the subject of a meeting to be held on the week following. I suggest this plan, not for any immediate action, but for the consideration of the Fellows of the Academy, with reference to the propriety of its adoption at a future time, after we are settled in our new quarters. The advantages of the plan may be enlarged upon should it be entertained by the Academy, at a future meeting.

In conclusion, I beg to return my sincere thanks for the uniform courtesy and kindness extended to me by all the Fellows of the Academy during my term of office. I relinquish the office to one more competent than I am for the duties of a presiding officer, who has been elected with great unanimity, and under whose administration the history of the Academy will, I doubt not, show progress.

And now, Mr. President-elect, in accordance with usage, placing in your hands a copy of the Constitution and By-Laws, I vacate the chair of office, in order that you may enter at once on your official duties.

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### DR. PURPLE'S REPLY.

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DR. FLINT: I thank you for the kind expressions which you have just uttered; coming as they do from one with whom in years past I have pleasantly labored for the promotion of the literature of our time-honored profession, and one also whose reputation as a clinical observer, teacher, and author, will be as enduring as the science of medicine itself. I receive, from your hand, this Constitution and these By-Laws, with a profound sense of the responsibility that now rests upon me. It must, sir, demand no ordinary effort to advance the interests of an institution which has been so successfully presided over, by such distinguished worthies in medicine as Stearns, Francis, Mott, Wood, Stevens, Cock, Smith, Parker, Batchelder, Watson, Anderson, Post, Buckley, Peaslee, and by yourself, citizens of no mean city. Permit me to hope that the mantle of the departed Elijah may descend upon and be not unworthily borne by me.





# OBJECTS AND PURPOSES;

*AN INAUGURAL ADDRESS DELIVERED BEFORE THE  
NEW YORK ACADEMY OF MEDICINE, JANUARY  
21, 1875, AT THE COLLEGE OF PHYSICIANS  
AND SURGEONS.*

BY

SAMUEL S. PURPLE, M. D.,

PRESIDENT OF THE ACADEMY.



NEW YORK:  
PRINTED FOR THE ACADEMY,  
D. APPLETON AND COMPANY, 549 & 551 BROADWAY.  
1875.



## INAUGURAL ADDRESS.

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FELLOWS OF THE NEW YORK ACADEMY OF MEDICINE—

GENTLEMEN: Called unexpectedly by your suffrage to preside over your deliberations, and with you to advance the best interests of the medical profession and this institution—permit me for a brief period, before proceeding to the regular paper of the evening, to occupy your attention with a consideration of some of the circumstances which originally led to the formation of this Academy; and to indicate some of the means by which its objects may be more completely fulfilled.

A little more than a quarter a of century has passed, since at a social gathering of medical men of this city, on the occasion of the fourth anniversary of the "Society for the Relief of the Widows and Orphans of Medical Men," the good and true men there assembled, organized on the suggestion and under the preliminary leadership of the ever to be lamented Dr. Alexander H. Stevens (whose biography has been so truthfully sketched by a distinguished Fellow of this Academy), for the purpose of a more thorough purification of the profession, and the construction of a common senate.

This organization eventuated a few weeks after in the establishment of the New York Academy of Medicine, whose declared objects were:

1. The cultivation of the science of medicine.
2. The advancement of the character and honor of the profession.

3. The elevation of the standard of medical education; and—

4. The promotion of the public health.

The necessity of the establishment of this organization, was found in the chaotic state of the profession; the rampant and defiant air of quackery, and its contaminating and demoralizing influence by association (which had for some time previously existed), upon professional morals, and which was most keenly felt. This association of the profession with quackery was by no means voluntary. It was a legal necessity under the peculiar circumstances of the case, hence the determination of the founders of this Academy "to separate," in the language of the late Dr. Manley, "the sheep from the goats" by banding together in establishing an institution which should be absolutely free from such influences. It was no easy task under such circumstances to elevate the standard of professional ethics. But a unanimity of action and purpose, seldom if ever before observed in the leading minds of the profession, prevailed; Stearns, Francis, Mott, Wood, Stevens, Cock, Manley, Smith, Batchelder, Watson, Bulkley, who have all now passed to their final reward, and with others, some of whom I see here this evening and are yet spared to us for counsel—labored earnestly to found "the first great barrier between quackery and medical integrity." Of the moral strength of this barrier, we have of late had most striking exhibitions; let us have faith in its firmness and solidity. That those who deviate from strict professional probity, as well as doers of evil in medicine, have felt and always will feel the reproving influence of this Academy is morally certain. He whose pretensions are groundless, alike with him who falsifies the pledge which he gave on entering the sanctuary of medicine, or on completing his fellowship with us, will surely not find favor nor obtain countenance either in social or professional relations.

To advance the best interests of the profession, and to increase its usefulness by furnishing facilities for social intercourse, and thereby promote harmony among medical men;

to procure a building to be devoted to the Academy of Medicine—one in which all the regular members of the profession might assemble and meet on common ground—these were foremost among the reasons assigned in the proposal to establish this institution. Do results warrant the conclusion that this organization has, either in the past or present, lost sight of the objects contemplated in its formation?

As cultivators of the science of medicine, the Fellows of this Academy have labored successfully in the field of medical literature, and their writings have shed lustre on the several departments of medicine. Our Transactions, and other publications, contain many practical and experimental papers abounding in practical deductions—ready expedients—and new and important advances in the medical sciences. As upholders and promoters of the character and honor of the profession and of medical education, it is but needful to refer to the record of the past, and to the teachings and successful efforts of a goodly number of the Fellows of the Academy, whose distinguished labors have reflected honor upon the profession, both at home and abroad. For the promotion of public health by legal enactments, legislators and others have sought and obtained from this body facts and opinions to guide them, and, not least of all, the original movement for establishing the health organization of this city, was inaugurated by its influence and instrumentality.

Having thus briefly directed your attention to the objects contemplated in the organization of this Academy, and to the fulfillment of some of these objects, permit me further to call your attention to one or more of the means which the present position of the Academy renders available, for the more complete fulfillment of the intentions of its founders. And here let me premise that no efforts of this Academy are in progress, and none are contemplated, which were not originally designed and laid out when its founders, after protracted counsel, banded together and pledged their honor to conform to the Constitution and By-Laws of this Association. If, to any, such should seem not to be the case, they have only to



institute a careful inquiry into the original acts of this body, and evidence will be adduced which will remove all doubts.

You have heard, gentlemen, the cheering words of your late presiding officer, on the progress made by your Committee on Ways and Means, in the acquisition of a building for the uses of the Academy—a hall where the whole profession may meet on common ground—one which shall be the recognized medical centre—within which the various medical organizations of the city may have ample accommodations for holding their meetings; where museums and libraries may be gathered, and where every department of medical study and investigation may find accommodation. Such a building, which will prove adequate to the wants and purposes of the Academy and of the profession for some time to come, you are already informed, has been purchased, and will, it is now believed, be permanently occupied by the Academy before the close of the coming summer.

The far-sighted wisdom of the founders of this Academy, in their early efforts to establish a building-fund, is now clearly seen. Slowly, and almost imperceptibly, that fund has been augmented, and with the additional collections for the same purpose by the committee just now referred to, is sufficient to warrant the movement that has been so ably advocated by my distinguished predecessor. It is in this movement, and the possession of a home, that many of the better and brighter hopes of the profession are centred. In it we see facilities for a greater centralization of the power and influence of medical men in all matters which appertain to medical science, and also to the health-interests of the public at large: may it not lead to a union of the scattered resources and medical organizations of the city? Let it not, however, be expected or understood that the acquisition of this home will lead to the suspension of further efforts for more enlarged and ample quarters to meet the unceasingly growing wants of the profession in this great metropolis: for in the language of the first circular issued by your Committee on Ways and Means, this Academy must eventually have

a building, not less imposing in its appearance than similar structures in the metropolis, and adequate in all its appointments to the growing wants and future exigencies of the profession. Permit me to suggest, gentlemen, in reference to this matter, that a sinking-fund be at once created, to meet eventually the debt already incurred, and that the committee before alluded to, be continued as a permanent one, with the distinct understanding that such a building must be ultimately possessed by this Academy.

That this body would lead the advance in all matters connected with the wants of the profession, in this city, was early contemplated. It has in the main done so. There is, however, one undertaking it has allowed to fall into the background, and which has been nearly lost sight of, evidently to the great detriment of the body itself, but partly from causes it could not readily control. I allude now to the early efforts put forth for the formation and increase of a Medical Library; such a one as would meet the necessities and requirements of medical writers, seeking for facts or information, either in the ancient or modern literature of the profession.

It needs no argument here to show the necessity or value of a great reference Medical Library, located in this city, for such purposes. The time has arrived in which it is imperatively demanded. The restlessness and longings of the profession, in this particular direction, have been observed for years past. They existed, though in a lesser degree than now, at the time this Academy was instituted, as will be seen by the fact that, immediately after its organization, a committee consisting of Drs. Gilman, Barker, Beales, Phelps, and Buel, was raised by resolution and designated the Library Committee, whose duty it was to have in charge and promote the formation of a Medical Library. It was organized by appointing the late Prof. Chandler R. Gilman, chairman, and I hold in my hand one of the circulars which it issued in January, 1847, to the Fellows of the Academy and the profession, requesting the donation of such books as they might feel willing to bestow on the institution. Many donations were received, and the flat-

tering hope indulged that a useful library would early be formed; the lack of room accommodations, however, soon became apparent, and ultimately obstructed the movement, and the committee after a time ceased its operations.

The nucleus thus gathered yet exists, and, with considerable additions made from time to time, is now available. Permit me, gentlemen, to suggest that the formation of a similar committee, with full power to establish a library-fund, be referred to the Council, and that the dormant effort be resuscitated and endowed with new life and vigor. I know the harvest is ripe for the sickle, and that such an effort, put forth under the movement that is now culminating, will be crowned with a speedy and abundant success.

Finally, Fellows of the New York Academy of Medicine, are we not warranted in believing that, in this movement of securing a building, the morning star of hope for the profession in this city has arisen; that the effulgent light of morning is now appearing; that a steady, earnest, and united labor will certainly bring the noontide of success, and then the influence of our profession will be more markedly felt, and more clearly recognized by the community at large? Gentlemen, committed to no policy, and with no interest to serve other than that which appertains to the good of this Academy and the profession, let me ask your indulgence while I attempt to discharge impartially the duty which your favor has devolved upon me.





NEW YORK ACADEMY OF MEDICINE.

1877.

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ANNIVERSARY DISCOURSE.

BY

DR. T. GAILLARD THOMAS.

# NEW YORK ACADEMY OF MEDICINE,

12 West Thirty-first Street.

Regular Meetings, First and Third Thursday Evenings in the Month.

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## OFFICERS FOR 1877.

### *President.*

SAMUEL S. PURPLE, M.D.

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*THE INFLUENCES WHICH ARE ELEVATING MEDICINE  
TO THE POSITION OF A SCIENCE.*

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AN

ANNIVERSARY DISCOURSE

*DELIVERED BEFORE THE NEW YORK ACADEMY OF  
MEDICINE, NOVEMBER 15, 1877.*

BY

T. GAILLARD THOMAS, M.D.,

PROFESSOR OF OBSTETRICS AND OF THE DISEASES OF WOMEN AND CHILDREN IN THE COLLEGE  
OF PHYSICIANS AND SURGEONS, NEW YORK.



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## ANNIVERSARY ADDRESS.

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*MR. PRESIDENT AND GENTLEMEN, FELLOWS OF THE NEW YORK  
ACADEMY OF MEDICINE:*

WHEN your kind request was conveyed to me that I should give to-night the address which is customary on each recurring anniversary of this Society, I felt that inclination to decline which is always the first impulse of a busy man who dreads assuming additional labors; but the pleasurable prospect, of standing in your midst, in the friendly relations of this moment, soon dissipated this feeling, and induced me to accept your invitation cheerfully, cordially, and thankfully. As, however, a search through your archives to discover, by an examination of similar efforts on the part of my predecessors, what was required of me, has brought to my notice the chaste and finished addresses of Manley, of Mott, of Stewart, and of Smith; the eloquence and humor of the genial Francis; the learning and research of Watson, of Post, and of Draper; and the able efforts of so many whom I recognize around me now, I have shrunk from the task from a different feeling, a fear that your selection of an orator for the present might belie your sagacity of the past. Unlike those whom I have mentioned, I have neither research nor eloquence to bring you, nor can I offer you, as some of your members have done, the brilliant results of personal investigation and inquiry to be sent forth from these halls to other lands, to take their stand among the contributions of our country to modern medicine.

Failing in ability in these two essential respects, I have chosen as my theme to-night,

“THE INFLUENCES WHICH ARE ELEVATING MEDICINE TO THE  
POSITION OF A SCIENCE.”

I trust to your kind indulgence to follow me through a rapid review and comparison of ancient and modern medicine, and

an examination of the causes which are so signally changing the character of the latter, and advancing it from the level of a mere empirical art to the dignity of a science. Should neither interest nor profit result from our study, then will the fault be entirely yours. You will suffer, and suffer justly, from bad judgment in selection of an orator; for surely never yet did theme possess in itself more of absolute merit and importance, or present a better field for gathering instructive and useful lessons. As votaries of the healing art, we "have but one lamp by which our feet are guided, and that is the lamp of experience." What could we more profitably do then than, with retrospective glance, to interrogate this experience as to those influences which have advanced and those which have retarded the most noble of all studies—the science of medicine.

From the earliest periods of civilization medicine has been practised as an art, and men have devoted their lives to the careful observation of the phenomena of disease, the recognition of those developments which would enable them to appreciate the probable course of different affections, and the means of counteracting their baneful influences upon the human system. As centuries rolled on the experience of one generation was, by manuscript records, preserved for those which succeeded it; the wisdom of one race was handed down, as it passed away, to nations which followed it; and each succeeding civilization found itself enriched at the very commencement of its career with the stores of learning accumulated by communities which had gone before.

Through the writings of Diodorus Siculus, of Herodotus, and of Strabo, we obtain a glimpse of the earliest records of medicine as it existed among the ancient Egyptians; and although we glean from them little to admire or to imitate, we learn that in this primeval land the art of medicine had its birth. Here, on the banks of the Nile, in the far distant days of the Pharaohs, undoubted records tell us of men who strove against disease, struggled after progress, and toiled through their generations, as we do now, in their ministrations to the sick. Peace to their mummied forms, they have long rested from their labors.



For over four hundred years the Jews lived in Egypt in a state of bondage. When a leader, who proved equal to the task of freeing, leading, and elevating them, appeared, they went forth as a nation well instructed in all the learning of their former masters. The Egyptians were the medical instructors of the Jews, as they were likewise of the Greeks.

The seed of knowledge thus planted produced among the first of these nations the sanitary laws which we read and admire to-day, and which must, in the early times in which they were framed, have accomplished a vast deal for the benefit of those for whom they were designed.

To the latter we owe the birth of that school of medicine, which, founded by the illustrious sage of Cos, four centuries before the birth of Christ, comes down to us as that to which we give our adherence to-day. Then came the Romans, adding to what the Greeks had taught them, to be succeeded by the Arabs, whose teachings come down to our own time in the writings of Rhazes, Avicenna, Ily-abbas, and Albucasis.

And now the accumulated experience of the ages was appropriated and added to by the developing nations of Europe, until those centuries which have received the name of the "Dark Ages," throw their pall of bigotry and retrogression over the civilized world, and benumbed the progress, and fettered the advance of all learning, science, and art. Thanks to the religious society of those times—to the old monks who with shorn crowns, and garments of serge, hoarded up the manuscript contributions of more liberal and learned periods—all recorded experience was not swept away; but safely garnered, and jealously watched, it was given forth as a rich boon to those who, during the sixteenth and seventeenth centuries, were to witness the dawn of a new era—the revival of learning, which had so long lain dormant and non-progressive.

If a dividing line can anywhere be drawn between ancient and modern medicine, between the periods which marked medicine as an art and medicine as a science, it would, with the greatest propriety, be drawn at about the latter half of the sixteenth and the commencement of the seventeenth centuries.

During this period, three great events occurred, which laid the foundation for that scientific research and accurate knowledge which were henceforth to place medicine among the sciences. These were the establishment of inductive philosophy, the perfection and utilization of the microscope, and the discovery of the circulation of the blood. The first of these prepared the minds of men for a new, rational, and safe method of study; the second afforded a means of studying, by the sense of sight, the microcosms concerned in anatomy, pathology, botany, and chemistry; and the third, giving evidence of the wonderful results of these methods of inquiry, opened new channels for thought, and prompted similar styles of investigation in other departments of medicine. This is the tripod upon which in the beginning rested the new-born science of medicine; these the three grand events which were to mark a new era in its history.

Then was it that Vesalius, and Paré, and Harvey, and Aselli, he to whom has been by some accorded the title of the "English Hippocrates," the illustrious Sydenham, lived and labored. And then, as the eighteenth century advanced, appeared as fruits of the new era in medicine, Boerhaave, Von Haller, Morgagni, Jenner, and the two Hunters.

It was in the first quarter of the seventeenth century that the important revolution, already referred to, occurred in the then existing systems of philosophy. The establishment of inductive philosophy by Francis Bacon, who has justly been styled "the father of experimental philosophy," unquestionably exerted a marked effect upon the methods of thought and investigation hitherto adopted in medicine. Influenced by the Baconian philosophy, from this period the habit of arguing from facts which had been carefully observed, and, wherever possible, tested by experiment, began to grow with steadiness; and it soon became evident that both moral and physical sciences were henceforth to combine in elevating our noble calling.

In the seventeenth century, too, a most marked influence was exerted upon medicine by the invention of the microscope, which

for a long time before this period had been known as a comparatively useless magnifying glass. Once rendered a practical device, it gave a wonderful stimulus to investigation and inquiry, lent precision to facts loosely fixed before ; and to the vision of the histologist, the physiologist, the chemist, the botanist, and the pathologist, opened worlds whose very existence was not hitherto imagined. More plainly than by words it told them that there were things in heaven and earth not dreamed of in their philosophy. As the telescope taught the astrologer of old to see in place of a few shining stars, world beyond world, system beyond system, in distances too great even for human conception ; so did the microscope open, to the enraptured vision of those who had hitherto groped in darkness, a microcosmic universe before unknown. Henceforth the old things of medicine were to pass away and all things to become new. The eyes of the brave Vesalius were as keen as ours, his intellect as bright, his devotion as great, but by the aid of this wonderful invention our eyes suddenly became a thousand times more penetrating than his, our limit of observation a thousand times more extended. The minute anatomy, the real seat of disease in each organ, became as clear to us as the gross anatomy was to him. What was for him a dark red mass penetrated by blood-vessels and nerves, became for us a collection of acini, surrounded by connective tissue and filled with cells. Then the diseased conditions of each of these elementary parts became, in a similar manner, comprehensible, and the road to still greater advances, from deeper study, could be seen opening up to the future.

There are thoughtful men who declare that so great has been the influence of the discovery of iron upon the development of civilization, that if it were even in our present advanced state taken away from us, we would not only cease to progress, but would absolutely retrograde into barbarism. In the same way it may be said that if we were to-day to lose the influence of the microscope, all progress in medicine would cease, and we should gradually lapse into the sloughs of uncertainty and speculation from which it has done so much to elevate us.

And now occurred a remarkable event for medicine which demonstrated the grand results of the combined application to its study of the moral and physical sciences: of inductive philosophy and anatomical research and experiment. In the first half of the seventeenth century William Harvey demonstrated to the world the circulation of the blood, and opened the flood-gates which were in future to pour a copious stream of knowledge upon physiology, and to enrich the science of medicine. Henceforth no foothold was to exist for the wild chimeras hitherto sustained in reference to the blood, its functions, and its course through the body. Harvey's opponents and detractors, whose name was "Legion," supported their views by argument; the great innovator enforced his by demonstration as clear, as convincing, and as unanswerable as the most certain deduction in mathematics. This grand discovery Bacon, a contemporary of Harvey, lived to see, but Vesalius, who opened the way for it had died sixty years before this glorious fruition of the seed which he had sown.

Who can tell how long, without Harvey's great work, impenetrable darkness would have continued, as of old, to encompass physiology, and the pathology and treatment of cardiac disorders? Who for a moment can suppose that without it medicine could ever have been, with reference to these affections, anything else than an empirical art? The possibility of drawing exact deductions from certainly-ascertained premises was attainable only by absolute physical demonstration. This was henceforth and forever entirely at our disposal.

At this late date it may be imagined that when, as in this case, science and empiricism grappled in conflict, the victory gained by the former was immediate, decisive, and unquestionable. Far from it! Harvey contended for a lifetime against bitter opposition and vindictive detraction. "Truth crushed to earth" does "rise again," but often it rises like an exhausted athlete, slowly, unsteadily, and feebly, till time has been given it in which to grow firm in the upright position. With Harvey's discovery it was but a question of time; ere long it had swept aside all opposition, vanquished all scepticism, and vindi-

cated its right to being considered a discovery equal in importance, as far as the benefit and happiness of mankind are concerned, to that of Columbus.

Up to this time medicine not only existed, but flourished, as an art; a noble, God-given art, which scattered its benefits lavishly. But at no period could the term science have ever been appropriately applied to it. It was pursued by wise, and good, and devoted men, but pursued as an empirical art, and as such was it handed from one civilization to another, as we have watched it passing onwards in its advance to the more modern times. But now, not by any sudden impulse or unexpected development, but by slow, laborious degrees, one man advancing here, another there, with many years intervening between them; each working some isolated strand into the forming structure—as it were line upon line, and precept upon precept; here a little and there a little, very gradually the science of medicine began to take form and to grow. Once securely established it has, during the last half century, made advances which have far surpassed those of any other period, and to-day we look upon it with satisfaction and pride, as bearing the relation to medicine as an art which the brain does to the members which it controls and directs.

None but an enthusiast can believe that medicine will ever become a pure and exact science. It must ever exist as a combination of science with art. Without the science to guide and instruct it, the art must remain pretty much what it was in the ages that have passed. Without the art, the science would stand a useless, profitless tissue of speculation. But the more completely the art becomes the handmaid of the science, the more certain will be its advancement, the more perfect its utility. Before we proceed let us pause here and inquire as to the true definitions of, and real distinctions which exist between, a science and an art.

I shall use the word "science" throughout this address in the broadest sense accorded to it by modern lexicographers, that which most perfectly distinguishes it from "art" and that which gives to it its most important and characteristic feature,

the acquirement through its instrumentality of knowledge which is absolutely certain. Science, derived from "*scio*, I know," may be said to consist in absolute, accurate knowledge which rests for its certainty upon immutable laws; art consists in the application of the precepts of science to a practical end or purpose. The end and aim of science is accurate knowledge; the function of art is the application of knowledge to the accomplishment of a given end. "A science," says Whewell, "is a body of principles and deductions to explain the nature of some matter. An art is a body of precepts with practical skill for the completion of some work. A science teaches us to know; an art, to do. In art, truth is a means to an end; in science, it is the only end."

As an art then, medicine is so old that it may truly be said to be coeval with civilization. As a science it is young, but its youth is vigorous, its growth rapid and healthy, and its prospects for the future most encouraging. The influences which have developed it in this respect in the past are those which are likely to do so in the future, and it behooves its well-wishers to carefully ascertain and industriously foster them.

I presume that it will to-day be generally accepted as truth, that the most marked feature of modern medicine, and that upon which, more than upon any other, has depended its gradual elevation from the field of speculation, uncertainty, and hypothesis, to that of certainty and exactitude, is the tendency to subordinate theory to experiment, to require for every dogma a demonstration, to push investigation by physical means to the utmost degree, and to accept nothing as fact which cannot give evidence of truth to the senses of the investigator. To this method of investigation, this mode of inquiry, are due these two important results: first, the shedding of floods of light upon places hitherto dark, obscure, and unfathomable, by subjecting them to means of physical exploration which have brought them under the influence of sight, hearing, and touch; second, the trampling down of formulas, the defiance of scholasticism, the explosion of arbitrary theories, the annihilation of seductive dogmas.

Before its adoption the organs of the body were to physicians like dark caverns with impracticable entrances, and the diseases which affected them were subjects for speculations and theories, such as only a century ago divided the profession into sects under the leadership of Stahl, Haller, Boerhaave, Brown, and Cullen. Once established, the day of the medical dreamer, who, like the cloistered monk, evolved seductive theories from the quietude of his study, passed away immediately and forever. The enunciator of high-sounding dogmas might still flourish among the people, for,

"Faith, fanatic faith, once wedded fast  
To some dear falsehood, hugs it to the last."

But he could no longer take root in medical soil, for exposed to the rigid investigation of physical science, brayed in the mortar of accurate analysis, his theories were dissolved like the baseless fabric of a vision, leaving not a rack behind.

And more and more as each revolving year adds to our experience are the means of physical exploration and inquiry being pushed into new and hitherto almost unexplored fields. His pathway illuminated by these, the modern investigator, no longer groping in the dark like his forefathers, sees clearly into the recesses in which lurk disease, and draws his deductions from certain premises.

To physical science medicine is more especially indebted for the rapid advances which have marked its career in the century in which we live.

And here let us ask, what is physical science? To borrow the definition given by the most recent writer upon the subject, it is that science which "relies exclusively upon, and is advanced solely by means of observation through the senses and experiments addressed only to the senses. Here, in its own domain, sense reigns paramount and holds undivided sway. Physical science recognizes no facts which cannot, directly or indirectly, be made evident to sense. All its modes of verifying facts, *i. e.*, of discerning the false from the true, are founded, in the last resort,

solely upon the testimony of the senses." \* This is the science which is forming to-day the corner-stone of medicine, a science which often depends so essentially, for the performance of its great functions, upon some simple mechanical contrivance, that we are in danger of confounding it with an art, and of losing sight of its own vast proportions.

It is wonderful to observe how much has been, in many instances, effected for the advance of a science by the invention of some instrument, mechanical contrivance, or plan for physical exploration and demonstration. Two of the most striking of these are to be found in the mariner's compass and the telescope, but there are many others scarcely less remarkable. Without the former, navigation, conducted by observation of the stars, must forever have remained an insignificant art, and worlds would have existed unknown and unsought for. Before the discovery of the latter, the astrologers, who pondered through the nights in vain contemplation and fruitless study of the celestial orbs, drawing horoscopes and predicting destinies, dominated science with their senseless babblings. But the far-discerning and exact instrument soon scattered them to the four winds of Heaven, and obliterated their influence and teachings, as the sun clears up the mists from the earth's surface.

And how multiform and various are the collateral advantages which flow from a discovery or invention which would at first sight seem to have no influence upon an improvement which follows it! It is certain that no sanitary laws, no hygienic enactment, no individual or national efforts could ever have done so much for the extinction of those desolating epidemics which formerly spread over Europe, as the invention of gunpowder has accomplished. While cities were defended and taken by hand to hand fighting, streets were made narrow and tortuous, the houses which bordered them were constructed high and overhanging, each one being a vantage ground for attack and defence, and from the dark and dismal and reeking byways the sun, with its vivifying and antiseptic rays, was banished almost completely. Here the germs of pestilence met

\* Bowen's "Modern Philosophy."



with congenial soil, and grew with vigor. But the "vile salt-petre" compound which cast pellets of iron over wall and moat, over bastion and drawbridge, sending destruction from afar, rendered all this worse than useless, and induced the constructors of cities to admit the light and air to every by-way and alley.

The three great events, which have just been referred to, did more than aught besides to establish medicine as a science; but they did even more than this, they prepared the way for great results by opening new channels and indoctrinating new methods of thought and inquiry in the medical mind.

How often do we lose sight of the educational influences exerted by great discoveries; of the moulding of minds and generation of ideas which they accomplish! How different the standard by which we should judge those who lived after the events which we have just noted from that which applies with justice to those who existed before them! Among the ancient Egyptians it was firmly believed that the heart yearly increased in weight at the rate of two drachms until the age of fifty, when it steadily decreased in the same proportion. Every day thousands of dead bodies were opened and embalmed by men who could not but have had skill, intelligence, and curiosity; yet no one seems to have thought of applying to this arbitrary theory the test of examination by weight, sight, and touch! We can look with leniency upon such unquestioning credulity in minds undeveloped by the great discoveries of modern times; but it became impossible after the new methods of thought to which they gave rise.

During the seventeenth and eighteenth centuries these influences were felt, but it was not until the nineteenth that rapid and certain advances were made in the same direction. One of the most important of these was the discovery of auscultation and percussion for the elucidation of diseases of the lungs and heart. Before the discovery of these means, hap-hazard reasoning and conjecture marked the diagnosis of the diseases of those organs; after it, all became certain and precise. No longer did the physician judge of their condition by the pulse,

tongue, and rational signs which were well calculated to mislead. His sense of hearing came to his aid with all its discriminating powers.

And now with great rapidity we passed out of darkness into the light with reference to other organs. The ophthalmoscope, like the electric light illuminating buried hulks far down in the depths of the sea, made clear the deep tissues of the eye, showed the oculist the little blood-clots upon the retina, and the broken vessels from which they had escaped. The laryngoscope threw bright rays into the dark nooks within the larynx and enabled the operator by its light to see and remove little polypi, the very existence of which could not have been suspected otherwise. The speculum uteri opened the way to a proper study of the diseases of the womb and to a new field of pathology and treatment; and more recently still the sphygmograph offers itself as an exact method of recording the regularity and force of the pulse; and the spectroscope as a means of testing, by a most delicate process, the fluids of the body.

All these I have mentioned as examples of exact methods of investigation which have been stimulated and greatly fostered by the invention of some instrument. Two instances of exact methods not having this source are those which in our day are accomplishing so much good, and which are themselves making such rapid advances—medical chemistry and experimental physiology. The first, by examinations of the blood, the solid tissues and the excreta, is lending great aid to the physician. The second, in spite of that maudlin pseudo-philanthropy which decries it, in defiance of the sickly sentimentality which would hamper it, is doing more for the advancement of physiology, and therefore of medicine at large, than centuries of reasoning and speculation have accomplished.

Upon no department of medicine have exact methods of study exerted a more beneficial influence than upon obstetrics. A hundred years ago obstetrics was an art alone. It could lay no claim to the name of science. Practised ever since the times of the Egyptian and Jewish midwives, entrusted to the hands of those who should be *physicians* during the Greek, the Ro-

man, and the Arabian civilizations, taken from their hands with what of the added precepts of ages had been preserved in the meagre literature of those times, it went onward to the middle of the eighteenth century, almost a mechanic art, unilluminated by the light of science, uncertain in all that related to scientific deduction. In the last quarter of the eighteenth century there arose a man, who simply availing himself of the means which had for thousands of years been at the disposal of all who had preceded him, means which, it is extraordinary to think, did not enlighten the Egyptian embalmers, opened the way to scientific investigation for those who should succeed him. Before his time men had speculated as to the gravid uterus and its contents. After it speculation was replaced by certainty depending upon ocular demonstration. The work of William Hunter upon the gravid uterus is the corner-stone of obstetrics.

So simple the method, so grand the result, that there may be many here to-night who wonder that it was left for Hunter to develop. But have not you and I, almost within the last decade, been as much at fault as were his predecessors and contemporaries? Have we not sat hour after hour, day after day by the bedsides of patients, theorizing and guessing like empirics at the degree of fever from which our patient suffered, while in the same room hung a thermometer which would not only have made speculation certainty, but would have told us with almost equal certainty that the life over which we watched would pretty surely be soon extinct? Had we but thought of this, how much of science would have been developed to guide us as to prognosis and general management! But the suggestive thought did not arise, and hence we did not make one of the most important discoveries which has enriched modern medicine and done a vast deal towards making it a science.

Much has already been done, but much more remains to be accomplished. How broad are the fields which are open to investigation: how numerous the instances in which profit, and honor, and renown await the successful inquirer. We have no reason to doubt that the children of the Pharaohs staggered and gasped under the spasms of whooping-cough long before the

pyramids were erected. This singular affection has been a household pest ever since, and many a little grave has been tenanted by its influence. Yet what do you or I know more than the old Egyptian magi did of its etiology, pathology, or even its specific treatment? I see a score of practitioners eager to rise and contest the last assertion. But alas, they would rise to defend the claims not of one but of twenty specifics—of prussic acid, of quinine, of belladonna, of chloral, of chestnut leaves, and of a host of others whose very number proves our poverty of resources. And is it otherwise with Asiatic cholera, with yellow fever, and a long list of other diseases?

I think that I almost hear a whisper to the effect that the therapeutical department of medicine, owing to the different results produced by the same drug upon different constitutions, must ever remain, to a great extent, empirical. Granted: but is it not equally true that the surest method by which an exact and scientific therapeutics will be reached is through the scientific study of the disease to be treated? A few years ago, all with reference to the treatment of epilepsy was surrounded with doubt and empiricism. To-day, thanks to the careful study and research of Brown-Séquard, we are able to check the violence of the disorder, to keep it within limits in most cases, even to cure it in some. It is most true that this result might have been arrived at empirically, as mercury was adopted in the treatment of syphilis, and quinine in that of malarial fever. But the truth that empiricism and not science has so long guided us in therapeutics, probably accounts for the undeniable fact that so few specifics exist in medicine to-day.

Having mentioned mercury and the iodides in syphilis, cinchona and its principles in malarial fevers, the bromides in epilepsy, and the chlorate of potash in stomatitis, our enumeration is completed. Two thousand years and more have elapsed since the days of Hippocrates; two thousand years should have given us a longer list than this. But during two thousand years medicine was an empirical art; as a science, who can doubt that its results, even in the next half-century, will be far more prolific than they have been in the whole long past?

It is not, however, in the discovery of specifics for different maladies that we must chiefly hope for great results from scientific medicine. It is in the prevention, the intimate knowledge, and the general management of disease. Let me illustrate this remark by a reference to one disorder—phlegmasia alba dolens. When, as in the olden time, this affection was regarded as a metastasis of milk, and at a later period as an acute post-partum inflammation, we can, from our present standpoint, readily perceive how a variety of erroneous, empirical, and even absolutely injurious treatment was adopted for it. But, in time, science intervened and illuminated the pathology of the subject with her pure and certain rays. It was discovered that those events of inflammation, the “tumor, calor, dolor,” of the old writers, all existed as consequences of a coagulation of blood in the large veins of the leg, where they enter the pelvis and inosculate with veins connected with the uterus. Here then was a condition due in part to an inflammation occurring in the inner coats of the veins, and in part to the condition of hyperinosis, which characterizes the blood state of pregnancy. Even to the most brilliant intellect this knowledge would offer no suggestion of specific treatment, but even to the dullest it would say, in terms too plain to be misunderstood: leeching, and blistering, and rubbing cannot remove a hard and obstructing blood-clot from the vein which it closes; they cannot establish circulation in the limb which is swollen by dammed up fluids. Perfect rest, relief of pain by opiates and fomentations, sustaining the system by careful feeding, and the use of tonics, like quinine and its salts, restoring the depraved blood to its normal state by iron, lime, etc., and standing the siege of disease till time shall raise it, is the only method of meeting and counteracting the difficulty which common sense points out. The intervention of science here accomplishes two important ends: First, it stops the abstraction of blood from a system already suffering from hyperinosis, which blood-letting increases, and prevents the teasing of an already exhausted nervous system by friction, blistering, and other similar disturbing agencies; second, it prevents sensible men from tampering with

their patients by trying those specifics which the shallow enthusiasts of our body are eternally shouting that they have discovered.

See, too, how much modern pathology, under the guidance of the microscope and of medical chemistry, has accomplished in the disease now known as septicæmia. A collection of symptoms not long ago grouped together under one head, and attributed vaguely and arbitrarily to a condition styled inflammation, are now thoroughly analyzed and fully appreciated. Pathology has annihilated the phrase inflammation in such cases as completely as did the perfected balance in chemistry destroy the old and apparently impregnable "phlogistic" theory.

Are there any lessons which this examination of the forces, which have in the past been instrumental in advancing medicine, may teach us? Is there any moral to the tale which has been told? It is to be found in this formula: In the past medicine has gradually advanced from an art to a science through the adoption of means which render all theory subordinate to physical demonstration, which "recognize no facts which cannot, directly or indirectly, be made evident to sense;" and as it was in the past so will it certainly be in the future. Exact methods of study, physical exploration, physical demonstration, are the only sources from which reliable deductions can be drawn.

These are the influences which have thus far given to medicine its character as a science; these the processes of thought and inquiry which will perfect that character in the future; these the methods which we should ourselves pursue and instil into the minds of those who go forth from our schools to take their places in the ranks of our profession. At this moment thousands of able and devoted men are in various parts of the world striving, by an earnest application of physical science, to elevate medicine to a higher scientific standard, and wherever you see this endeavor most determinedly followed, there you see the nearest approximation to success. The thoughtful, honest, painstaking, and persevering students of Germany have in our day placed that country in advance of all others in scien-

tific medicine. And why? Because these are their methods of study, these their means of inquiry in laboratory and at the bedside. In purely scientific medicine, though in naught besides, America stands far behind her European sisters. And again let me ask why? Because Americans work too exclusively for the attainment of the practical and utilitarian in medicine; too much for medicine as an art, too little for medicine as a science. Far be it from any American to ignore or undervalue the scientific contributions of his country. They need not be enumerated here, for they are duly recorded in the annals of a profession which never forgets honest and deserving labor. In comparison, however, with her contributions to the art, those which she has made to the science are disproportionately small. America boasts with pardonable pride to-day of McDowell, of Mott, of Wells, and of Sims, who have given the most original and important discoveries to medicine as an art; but her Harvey, her Lavoisier, her Virchow, and her Graefe, remain yet hidden in the womb of time.

The day has surely come when a country which has done so much for the art of medicine should do proportionately more for the science; when men should arise who are willing to devote their lives to the search after truth; not as a means by which to coin gold and achieve position, but after truth for its own sake. That many such men will live amongst us in the future we all hope and believe. That many have lived in the past who has the hardihood to maintain?

If the premises which I offer you, and the deductions which I draw from them be correct, it becomes evident that the road to improvement and to national progress lies clearly open before us. Let us strive to place upon it the young men who are just devoting themselves to medicine by giving a proper direction to their labors and energies, and let this Academy recognize as one of its highest functions the duty of being prominent in this good work. Train the young practitioner in the very commencement of his career, not how to gain and hold a large practice; but how to study the diseased conditions with which he will meet; instil into his mind the habit

of so doing, and the surest blow will be struck at the root of our weakness. We may calculate with entire confidence upon the intelligence and devotion of the young physicians of America. The duty of the hour is to encourage, incite, and direct their willing hands to the most effectual method of accomplishing the desired end.

Of late we hear a great deal said about the advisability of increasing the length of college terms, of requiring fuller preparatory study, and of establishing more rigid examination in our schools. That these reforms would prove of value no one can doubt, but there are others which are equally needed. No more industrious, active, and ambitious class exists amongst us to-day than the medical students of the United States. If the curriculum of medical studies sends them forth superficial and unscientific practitioners, the fault is not theirs. It is we, their teachers, we who are wanting in our duties, we who fail in making them what they should be, through the inefficiency of our methods of training and instruction. Let the axe of reform be laid at the root, and not used upon the branches of the tree, if any great results are aimed at. Let us teach our students more in the laboratory and at the bedside, and less in the didactics of the lecture room. Let us teach them rather how to study disease by the aid of all the exact methods at our disposal, than fill their minds with the teachings of books. Let us make them work and observe; let us inspire them with a spirit of personal inquiry, and incite them to personal investigations rather than send them forth, their brains teeming with multiform theories, their memories overloaded with a mass of crude material poured into them from the rostrum of the lecture room.

America has learned many a lesson from Europe, and often has she returned it with interest to those who gave. Let her but learn this one, and, in the words of Shylock, she will surely ere long be able to say,

"It shall go hard,  
But I will better the instruction."





NEW YORK ACADEMY OF MEDICINE.

1877.

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AN ADDRESS

ON THE

MEDICAL LIBRARIES OF NEW YORK.

# NEW YORK ACADEMY OF MEDICINE,

12 West Thirty-first Street.

Regular Meetings, First and Third Thursday Evenings in the Month.

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# MEDICAL LIBRARIES;

*AN ADDRESS DELIVERED BEFORE THE NEW YORK  
ACADEMY OF MEDICINE, JANUARY 18, 1877, ON  
TAKING THE CHAIR AS PRESIDENT A  
SECOND TERM.*

BY

SAMUEL S. PURPLE, M.D.,  
PRESIDENT.



NEW YORK:  
PRINTED FOR THE ACADEMY,  
12 WEST THIRTY-FIRST STREET.  
1877.



## ADDRESS.

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### *FELLOWS OF THE NEW YORK ACADEMY OF MEDICINE:*

IN yielding to the requirements of an established custom, the obligations of which devolve upon me by reason of your choice a second time, to occupy the honorable position and discharge the duties of your presiding officer, I have been led to believe that on this occasion the interests of this Institution can be promoted, possibly, in no better way than by a brief survey of the progress that this Academy has made during the past two years—the means which have been adopted and are still required to extend its beneficial influence.

To speak of causes which retard the scientific growth of medical associations, and of professional harmony, which causes necessarily exist in all commercial cities, is no purpose of mine. These will, as social intercourse, literary culture, and the love of science become more deeply implanted in the hearts, and age matures the judgment of medical men, take to themselves wings and fly away. They will hide themselves in narrow and sordid minds, who soon pass from the active stage of medical life, and, like falling stars, leave no track behind them.

First, then, of the material progress of this Academy: Two years ago this month, your Committee on Ways and Means, after several years of earnest effort to acquire the requisite funds, had just engaged to purchase this comfortable and commodious building for the use of the Academy and of the profession. That Committee, acting upon instructions, as soon as possession of the property could be obtained, prepared it for use, and on the 20th of May, 1875, this Academy, for the first

time, held a meeting in its own home. The limits of the present time will not permit me to detail the interesting exercises of that occasion. Justice to the memory of departed founders of this Institution, however, demands that I should state that portraits in oil of Drs. John Stearns, Joseph M. Smith, Galen Carter, and Gilbert Smith, all founders of this Academy, all exemplary, honorable, most worthy, and active members of the medical profession in this city, were on that evening donated by venerating friends, and placed upon our walls; and those of Drs. Isaac Wood, John Watson, James Anderson, and Alfred Underhill, also original members, were soon after added to our gallery, where, by striking resemblance to the distinguished originals, and constant presence, they will act as prompters of professional zeal and social harmony. I see here to-night only a few of their contemporaries. Many of the original members have passed away to that bourne from which no traveller returns. May we not hope that ere long likenesses of these, our honored dead, may also be placed upon our walls, by loving wives, affectionate children, or kind friends, to which we may direct the attention of the rising members of our profession, and to whom we may say: "These are our jewels?"

Viewed from a scientific standpoint, the proceedings of the stated meetings and the papers read before the Academy during the period now under review, have been equal to, if not in advance of, previous years. Many of the papers read here have been published at once in the leading medical journals of this country; while others of unusual merit in the different divisions of medicine, have, under instructions emanating from the Council, been by the Committee on Publication carried through the press and published by D. Appleton & Co. in a comely volume of over five hundred octavo pages, which will, for scientific merit, beauty of typography, and commendable appearance, compare favorably with the publications of sister institutions either in this country or Europe.

A revised edition of the Constitution and By-Laws, which



included a list of Fellows and contributors to the Building Fund, was published in August last, which represents more perfectly the condition of the Fellowship of the Academy than any previous publication; and, finally, the instructive and interesting Anniversary Discourses of Drs. Hudson and Wm. T. White have been placed in the hands of the members in a printed form. The aggregate cost of all these publications represents about thirty per cent. of the annual dues paid by the members, which, being gratuitously distributed among them, may be regarded in the nature of a dividend to those who have paid the "annual tax."

Thus, it will be seen that this Institution, unlike some others, recognizes the moneys paid into the treasury as in the nature of trust funds, which should only be used for the comfort, edification, and improvement of its Fellowship, and the profession.

And this brings me to a subject which has claims upon the attention of the Fellows of no ordinary importance. It will be remembered by those who have carefully studied our constitution and laws, that our very worthy and honorable Board of Trustees are invested with the charge of the "Building Fund and its accumulations by interest, donation, or bequest, and of all other invested funds of the Academy;" and it is made their duty "safely to invest, to collect the interest on, and hold the securities for any moneys of the Academy intrusted to their care; to report the modes of investment and the condition of the funds or property to the council, when required, and annually to the Academy." Already donations to the first-named fund have been made, and the earnest and prompt attention and aid of the Fellows is called to its immediate increase. May we not expect that additional zeal will be incited in the membership of this Academy by the attainment of an object which, we have reason to believe, will be reached at no distant day, through the honorable the Legislature of this State?—the realization of which will again markedly demonstrate the wise and comprehensive foresight of those who have been trusted,

and have not been found wanting in their devotion to the best interests of this Institution.

If we recall the results attained during the past year, both in the number and value of books received into our library, there probably will not be a Fellow of this Academy but will be surprised and possibly stimulated to extend a helping hand to push forward a work which has much to commend itself to all. From the first annual report of your Library Committee, we gather these facts: There were received into the Library, by donation and bequest, during the year 1876, one thousand and seventy-six bound volumes, one thousand nine hundred and forty-five medical pamphlets and miscellaneous medical journals, twenty anatomical and pathological plates, ten lithographic portraits of distinguished medical men, and three plaster busts. All from sixty-three donors. Of this number three hundred and eighty-four volumes were received by legacy from our ever to be remembered friend and distinguished associate Fellow, the late Dr. John Osgood Stone, whose sudden, but not to him unexpected death, on the 7th of June last, cast a gloom over a wide circle of friends, and also of the whole community. His interest in the Academy had been previously manifested by valuable gifts to our Library, and to the Building Fund. May we not hope that this last evidence of his good will, as well as that so kindly shown us by his bereaved widow, will prove suggestive to many others of our number?

As these results have been reached through voluntary donations and bequests, with scarcely any pecuniary outlay from the treasury of the Academy, may we not expect that a moderate amount of pecuniary aid, combined with like efforts, and the institution of a Library Fund during the present year, will place the library of this Academy upon a sure basis, and soon cause it to rank among the first in this country? Then and not till then, will it fully meet the required wants of the Fellows and those of the profession.

But here, at this stage of my desultory remarks, I am reminded that there are some who doubt the feasibility, and also

the permanency of any success in this direction. But let me ask, do not historic records prove that in no period of the history of the art or science of medicine has any great improvement been made through the labors of the many? Nearly all has been accomplished through the zeal and effort of a few individuals. Witness the advance made in anatomy and physiology by the world-renowned Harvey; the advance in practical medicine by Britain's distinguished physician, Bright; Ireland's careful and intelligent clinical observer, Stokes; or—turning our attention to our own country—the advance in gynecology, by a Kentucky backwoodsman, the cautious yet bold McDowell, the father of ovariectomy; or—coming still nearer home—the advance in conservative and operative surgery by a former President of this Academy.

And now, gentlemen, permit me to direct your attention to the history of the efforts that have been made by the profession in this city to establish a library, to meet the wants of medical men. The first notice we have of the existence of a medical library here, connected with a medical organization, goes no further back than the year 1787, and is that belonging to the "Medical Society" as it was then called. This Society was instituted previous to the war of the American Revolution, and is alluded to in a discourse by Dr. Peter Middleton, published in 1769.\* Upon the capture of this city by the British forces under Howe and Sir Henry Clinton, in September, 1776, it suspended operations, and was not resuscitated until the fall of 1784. I have as yet failed to find any mention of a Library in connection with this Society before 1787.

On the 4th of November, 1794, the Medical Society of the State of New York was organized,† and Dr. John Charlton

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\* A Medical Discourse, or an Historical Inquiry into the Ancient History and Present State of Medicine: The Substance of which was Delivered at Opening the Medical School in the City of New York. By Peter Middleton, M.D., And Professor of the Theory and Practice of Physic in King's College. Printed by Desire. New York: Printed by Hugh Gaine, in Hanover Square, M. DCCLXIX.

A copy of this work is in the Library of this Academy.

† MS. Minutes of the Medical Society of the State of New York from 1794

elected President, and Dr. John R. B. Rodgers, Secretary. Negotiations were immediately entered into to purchase the library of the "Medical Society," and in December of the same year the Librarian, Dr. William Pitt Smith, was ordered to transfer the same by sale to the newly organized Society. On the 13th of January, 1795, Dr. David Hosack was appointed Librarian, and the books were placed under his care, subject to the rules of the City Library, then located in the City Hall, and to which in the following summer this Library was removed. On the 11th of April, 1797, a Committee, consisting of Drs. John R. B. Rodgers, James Tillery, and William Hamersley, was appointed to confer with the Governors of the New York Hospital on the subject of uniting this Library with the one which they had instituted in July, 1796, in connection with the Hospital, on the recommendation of the Medical Faculty of Columbia College, and to which they had appropriated the sum of five hundred dollars for the purchase of medical books. On the 10th of October following, the Committee reported that they had failed to accomplish the object contemplated, and were discharged. In July, 1800, the censors of the Medical Society of the State of New York authorized Dr. Nicholas Romaine, then in London, to purchase books to the amount of fifty dollars; these books came into their possession in October of that year. On the 11th of January, 1803, the Society received a donation of several volumes from Dr. John Coakley Lettson, of London. In the spring of 1805 negotiations between the Society and the Governors of the New York Hospital were renewed, and on the 9th of April of that year the Society passed the following resolution:

*"Resolved,* That a committee of three members be appointed to confer with the Governors of the New York Hospital on the subject of assigning the Library of this Society to the said Governors, for the purpose of increasing the Library of the Hospital, and that they propose as a condition that present members of

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to 1806, recently donated to the Library of this Academy by Dr. S. W. Francis, of Newport, Rhode Island.

this Society shall become entitled to a share in said Library, which share shall descend to a son, provided he shall become a regular bred physician and a resident practitioner in this city.

*“Resolved, That Drs. Tillery, Stringham, and Hamersley be that committee.”*

The result of these negotiations was the transfer of the Library of the Medical Society of the State of New York, in the summer of 1805, to the Governors of the New York Hospital, substantially upon the terms of the resolution just recited. The following year, 1806, the Society was merged into the Medical Society of the County of New York.

Proposals to establish a Library under the auspices of the Medical Society of the County of New York were advocated by the late Dr. David Hosack, in his inaugural address, as President of that Society, in 1824. These proposals were again urged by the late Dr. Peixotto, in an address, on a similar occasion, in 1831. The latter gentleman supplemented the scheme by advocating the establishment of a “Library Fund,” the more effectually to accomplish the object. I am not aware that this latter suggestion was ever carried into effect. The records of the Society show that the formation of a Library was begun in 1825, and that a degree of success attended the effort. In July, 1831, the following statement was made by Dr. Peixotto, in his inaugural address on assuming the Presidency of the Society: “Little success has as yet attended the attempt to form a Library worthy of the character of our city, or adequate to supply the wants of an extended medical community. The time has, however, arrived, when we may, without exaggerated hopes, set about instituting a New York Medical Society Library. The mere number of our members is now so great, that a very small contribution from each, either in books or money, as an outfit, would form a respectable nucleus, which would not fail to be augmented by additional supplies. These would be furnished partly by individual liberality, partly by small annual contributions from each member, and, perhaps, we might venture to hope, not



altogether vainly, by public munificence. The distinguished incumbent of this chair (Dr. Hosack), to whom I have already had occasion to allude, long since promised to exercise his usual liberality in the promotion of this great object; and I sincerely believe that he is only prevented from evincing his munificence by the indifference of the Society, and by the want of suitable accommodations to receive and preserve valuable books. Other resources will not be wanting, I know, to enrich the collection. I respectfully suggest the adoption of immediate measures to enforce the success of so desirable an object. To this effect, let a separate fund, to be entitled the "Library Fund," be forthwith instituted; and for its accumulation we may confidently rely on the generous zeal, no less than the notorious wants of every member of the profession."

From the time of this earnest appeal a moderate degree of advance was made, and several hundred volumes were gathered together, and, within the recollection of some of those present, kept in the house of the Secretary, Dr. Henry S. Downs. Subsequently, about 1862, by order of the Censors of the Society, the collection was sold, and all further efforts towards the formation of a Library by this time-honored Society ceased.

The Library of the New York Hospital, as we have before intimated, had its origin in a recommendation made by the Medical Faculty of Columbia College, in June, 1795, to the Governors of the Hospital, who, on the 7th of July, 1796, acting upon suggestions, appropriated "the sum of five hundred dollars towards the purchase of a Medical Library; to which the members of that faculty contributed books from their private libraries, and part of their fees of public instruction. An Hospital Library was thus instituted, which was further augmented by the purchase of the medical library of the late Dr. Romaine, in 1800, and by the accession, in 1805, of the library of a private association of physicians, then called "The Medical Society of the State of New York," before referred to, who gave their books, on condition that they and such of their sons as

should become practitioners of medicine in the city of New York should have free use of the Hospital Library.

In 1805 the Governors appropriated the annual sum of two hundred and fifty dollars for the purchase of books; and other large additions were afterwards made to it by special purchases from time to time, among which was the valuable botanical library of Dr. Hosack, bought by the Hospital. This valuable library, which has from its origin possessed a permanent home, is the largest and in some respects the most complete collection in this city. It numbers near ten thousand volumes, and its average yearly increase is about one hundred and twenty-five volumes. It is under the guardianship of one whom we are pleased to say is an original member of this Academy, and who for more than thirty years has labored to promote its interests in all legitimate ways.

The Medical Journal Association of the City of New York was organized in the autumn of 1864, and has included among its members many of the most prominent men of the profession in the city. Its original plan was to establish only a library of medical journals and monographs, to the exclusion of ordinary medical works. A change was made in this plan, followed by the purchase of the libraries of the late Drs. Batchelder, Elliot, and Foster, at a cost of nearly four thousand dollars, an innovation which created some division of sentiment, and finally led to the dispersion of the collection of medical books, which formed the greater part of this library, and a restoration of the primary objects for which the Association was organized.

The late Dr. Valentine Mott, by a provision of his will, directed that his library and surgical instruments should not be sold or divided, but preserved together and placed in a room, specially appropriated to that purpose, during the lifetime of his wife, who might bequeath them to one or more of his grandsons who should bear his name, study medicine, be a graduate, and have a respectable, honorable name. This library, with that of the late Dr. Isaac Wood, forms that known as the Mott Memorial, Medical, and Surgical Library.

Other libraries, or small collections of medical books, exist in connection with medical colleges, hospitals, etc. That of the College of Physicians and Surgeons contains about twelve hundred volumes. This collection is (when accessible) free to the Trustees, Fellows, and matriculated students of the college. The library of Bellevue Hospital contains about three hundred and fifty volumes. It is intended for the use of the medical and surgical staff of the hospital. Its increase during several years past has been nominal.

The Medical Department of the University of the City of New York, during the past year, has instituted measures for the formation of a library, and some advance has been made in this direction. It is the design of the Faculty to prosecute the work with increasing diligence.

Several of the public libraries of this city have a department of medicine, and the foremost of this class, in point of number of volumes, is the Astor Library. This library contains about seven thousand five hundred volumes on medicine and the collateral sciences; including chemistry, botany, and medical periodicals. It is free to all who wish to consult it. The Mercantile Library contains about one thousand volumes on medicine and the collateral sciences. The New York Society Library contains also about one thousand volumes on medicine, botany, etc. The two last named require, from such as are not members, a subscription fee.

The library of the College of Pharmacy of the City of New York contains about one thousand two hundred volumes of standard works on all branches of the pharmaceutical profession, and includes many recent works, also files of the American and Foreign pharmaceutical journals. It is free to the members and alumni of the college.

I appeal to you, gentlemen, to answer, that if the diversified efforts in past years, by the medical men of New York, in establishing small and separate libraries, had been concentrated upon one object, that of collecting and preserving a



single large reference medical library, the work would have been already accomplished?

It is deemed unnecessary to apologize for the minutia of the details which we have given of the efforts of the medical profession in this city to secure for itself a medical library, for in these details are disclosed the history, and method, by which the profession lost its vantage ground in a movement which, in more than one sense of the word, is an element of professional growth, improvement, and renown. We gather from these details the fact that the lack of success of nearly every attempt lay in the want of persistent effort, and the absence of a permanent home in which the organization could collect, preserve, and keep intact—free from the possibility of dispersion the small accessions that were made from time to time to their collections. Accumulation is almost as much the result of preservation as of addition; and, to preserve any collection of books, a place of permanent deposit is a certain prerequisite to ultimate success. And now that we have such a place, permit me to present for your consideration some remarks on the ways and means by which this Academy may build up such a library.

A well-founded medical library in this city, and under the auspices of this Academy, can be accomplished now that we possess a permanent Home, as follows:

1st. The institution of a Library Fund, which should be properly invested in such securities as will be safe and yet yield a fair interest—this interest only to be used for the purchase of such books as are needed, and which are not likely to come into the library by gift. In this connection let me say that the Bar Association of this city laid the foundation of its Library Fund in 1870, by one hundred members subscribing \$100 each in cash. This fund, I learn, affords ample means for all necessary yearly additions to the library of that institution, which now, at the end of six years, contains ten thousand volumes.

It is now believed by many that the institution of such a fund by members of this Academy can be effectually accomplished. The necessity is urgent! Have we not reason to

believe that in all divisions of knowledge the discovery of the causes of lack of success in a meritorious enterprise will lead the wise and good to develop positive means for remedying the defect?

2d. By voluntary donations of medical books, pamphlets, journals, portraits, engravings, busts, manuscripts, etc., etc., which may have become to their possessors useless or burdensome. And in this connection I would respectfully suggest that for the better encouragement of said donations, this Academy direct that its Library shall be open to the use of all regular members of the profession.

A popular error exists in the profession, and it has done much to retard the establishment of a good reference medical library in this city. There are not a few who believe that only the best books and latest editions are worth preserving. This idea has tended greatly to retard the growth of our own Library during even the past two years. No book or pamphlet is worthless; every waif from the mental laboratory of the practical physician contains a fact, or, it may be a statement of facts, which, however darkly concealed or obscured by peculiarities of language or description, will ultimately be unearthed, and serve the genius of practical medicine or medical history. In illustration of the truth of this statement, witness the recent disclosure which your speaker made first in the Section on Obstetrics and the Diseases of Women and Children, and afterward in this Academy, that more than a century since Drs. Colden and Bard described here epidemics of diphtheria—the scourge of our city in these days.

The description of this disease by Dr. Colden, in 1753, lies concealed in a somewhat scarce and neglected publication of a long since extinct medical society of London;\* whilst the description of the epidemic of this disease in this city, in 1770, by Dr. Samuel Bard, is contained in this little brochure† which

\* Medical Observations and Inquiries by a Society of Physicians of London. Vol. I. London, 1757.

† An Enquiry into the Nature and cure of the Angina Suffocativa, or Sore

your speaker rescued from the press-box of a second-hand paper-dealer in this city *in transitu* to the maw of a paper-mill. Its former owner had sold it for the eighth part of a cent, or at the rate of two cents per pound.

With your permission, I will read extracts from its precious pages. In speaking of the epidemic he says:

"In general, this disease was confined to children under ten years old, though some few grown persons, particularly women (while it prevailed), had symptoms in some respects resembling it. Most of those who had it were observed to droop for several days before they were confined. And the first symptoms, in most instances, were a slightly inflamed and watery eye, a bloated and livid countenance, with a few red eruptions here and there upon the face, and in one case a small ulcer in the nose, whence oozed an ichor so sharp as to inflame and erode the upper lip. At the same time, or very soon after, such as could speak complained of an uneasy sensation in the throat, but without any great soreness or pain. Upon examining it the tonsils, *or almonds*, appeared swelled and slightly inflamed with a few white specks upon them, which in some increased so as to cover them all over with one general slough, and in a few the swelling was so great as almost to close up the passage of the throat; but this, although a frequent symptom, did not invariably attend the disease; and some had all the other symptoms without it. The breath was either no ways offensive, or had only that kind of smell which is occasioned by worms; and the swallowing was very little, if at all, impeded.

"These symptoms, with a slight fever at night, continued in some for five or six days without alarming their friends; in others a difficulty of breathing came on within twenty-four hours, especially in the time of sleep, and was often suddenly increased to so great a degree as to threaten immediate suffocation. In general, however, it came on later, increased more

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Throat Distemper, as it is commonly called by the Inhabitants of this City and Colony. By Samuel Bard, M.D., and Professor of Medicine in King's College, New York. New York: MDCCLXXI.

gradually, and was not constant; but the patient would now and then enjoy an interval of an hour or two in which he breathed with ease, and then again a laborious breathing would ensue, during which he seemed incapable of filling his lungs, as if the air was drawn through a too narrow passage.

"This stage of the disease was attended with a very great and sudden prostration of strength; a very remarkable hollow, dry cough, and a peculiar change in the tone of the voice, not easily described, but so singular that a person who had once heard it could almost certainly know the disease again by hearing the patient cough or speak. In some the voice was almost entirely lost, and would continue very weak and low for several weeks after recovery. A constant fever attended this disease, but it was much more remarkable in the night than in the day time; and in some there was a remarkable remission towards morning. The pulse at the wrist was in general quick, soft, and fluttering, though not very low, and it was remarkable that at the same time the pulsations of the heart were rather strong and smart than feeble. The heat was not very great, and the skin was commonly moist.

"These symptoms continued for one, two, or three days. By that time it was usual for them to be greatly increased in such as died; and the patients, though commonly somewhat comatous from the beginning, now became much more so; yet even when the disorder was at the worst, they retained their senses, and would give distinct answers when spoken to; although, on being left to themselves, they lay for the most part in a lethargic situation, only raising up now and then to receive their drink. Great restlessness and agitation came on towards the end of the disease, the sick perpetually tossing from one side of the bed to the other, but they were still so far comatous as to appear to be asleep immediately upon changing their situation or posture. An universal languor and dejection were observed in their countenances; the swelling of the face subsided; a profuse <sup>the head, neck, and breast, par-</sup> ~~the head, neck, and breast, par-~~ <sup>tion</sup> ~~tion~~ <sup>ig in several came on; the</sup>

difficulty of breathing increased, so as to be frequently almost entirely obstructed, and the patient died apparently from suffocation. This commonly happened about the end of the fourth or fifth day; in several within thirty-six hours from the time the difficulty of breathing first came on.

“One child, however, lived, under these circumstances, to the eighth day; and the day before he died, his breath and what he coughed up was somewhat offensive; but this was the only instance in which I could discover anything like a disagreeable smell, either from the breath or expectoration.

“Out of sixteen cases attended with this remarkable suffocation in breathing, seven died; five of them before the fifth day, the other two about the eighth. Of those who recovered, the disease was carried off in one, by a plentiful salivation, which began on the sixth day; in most of the others, by an expectoration of a viscid mucus.” . . . .

“One of the first families in which this disease appeared was that of Mr. W. W., of this place. He had seven children in his family, all of whom were taken ill, one after another. The four first had the disease as I have just now described, and three of these died; the one who recovered was the instance I mentioned, in which the disease was carried off by a salivation. The other three were the youngest. They had not the difficulty of breathing, but, in its stead, very troublesome ulcers behind their ears. These began with a few red pimples, which soon run together, itched violently, and discharged a great deal of a very sharp ichor, so as to erode the neighboring parts, and in a few days spread all over the back part of the ear, and down upon the neck. They all had a fever, particularly at night, and one of them had a perpetual tenesmus (*or urging to go to stool*). This symptom appeared in some who had the difficulty of breathing, but in none to so remarkable a degree as in this child.

“After this many other children had similar ulcers behind their ears, and some of them seemed slightly affected with the difficulty of breathing; but it never became alarming while this

discharge continued. These ulcers would continue for several weeks, appeared covered in some places with sloughs, resembling those on the tonsils, and at last grew very painful and uneasy.

"In some cases they were attended with swellings of the glands under the tongue and behind the ears, which subsided on the eruption appearing and discharging freely, and again swelled upon the discharge being checked." . . . .

"I have had an opportunity of examining the nature and seat of this disease, from dissection, in three instances. One was a child of three years old. Her first complaint was an uneasiness in her throat. Upon examining it, the tonsils appeared swelled and inflamed, with large white sloughs upon them, the edges of which were remarkably more red than the other parts of the throat. She had no great soreness in her throat, and could swallow with little or no difficulty. She complained of a pain under her left breast; her pulse was quick, soft, and fluttering. The heat of her body was not very great, and her skin was moist; her face was swelled; she had a considerable prostration of strength, with a very great difficulty of breathing, a very remarkable hollow cough, and a peculiar change in the tone of her voice. The next day her difficulty of breathing was increased, and she drew her breath in the manner before described, as if the air was forced through too narrow a passage, so that she seemed incapable of filling her lungs. She was exceedingly restless, tossing perpetually from side to side, was sensible, and, when asked a question, would give a pertinent answer, but otherways she appeared dull and comatous. All these symptoms continued, or rather increased, until the third night, on which she had five or six loose stools, and died early in the morning.

"Upon examining the body, which was done on the afternoon of the day she died, all the back parts of the throat, and the root of the tongue, were found interspersed with sloughs, which still retained their whitish color. Upon removing them, the parts underneath appeared rather pale than inflamed. No

putrid smell could be perceived from them, nor was the corpse in the least offensive. The *œsophagus, or gullet*, appeared as in a sound state. The epiglottis, *which covers the wind-pipe*, was a little inflamed, on its external surface, and on the inner side, together with the whole larynx, was covered with the same tough white sloughs as the glands of the throat. The whole trachea, quite down to its division in the lungs, was lined with an inspissated mucus, in form of a membrane, remarkably tough and firm, which, when it came into the lungs, seemed to grow thin and disappear. It was so tough as to require no inconsiderable force to tear it, and came out whole from the trachea, which it left with much ease, and resembled more than anything, both in thickness and appearance, a sheath of thin shammy leather. The inner membrane of the trachea was slightly inflamed; the lungs too appeared inflamed, as in peripneumonic cases; particularly the right lobe, on which there were many large livid spots, though neither rotten nor offensive; and the left lobe had small black spots on it, resembling those marks left under the skin by gunpowder. Upon cutting into any of the larger spots, which appeared on the right lobe, a bloody sanies issued from them without frothing, whereas, upon cutting those parts which appeared sound, a whitish froth, but slightly tinged with blood, followed the knife." . . .

"This is a faithful history of this complaint, as it appeared in most of the cases I have met with, and in which I have been careful to enumerate such symptoms only as I myself have seen." . . .

"Upon the whole, therefore, I am led to conclude that the disease called by the Italians *morbus strangulatorius*, the croup of Dr. Home, the sore throat of Huxham and Fothergill, this disease, and that described by Doctor Douglass of Boston, however they may differ in the symptoms of putrescency and malignancy, do all bear an essential affinity and relation to each other, are apt to run into one another, and, in fact, arise from the same Leven, which, as Doctor Fothergill styles it, is a *stimulus of a peculiar nature*, which more or less, according to particular

circumstances, generates an acrimony in the humours, and disposes them to putrefaction, and which has a singular tendency to attack the throat and trachea, affecting the mucous glands of these parts in such a way as to occasion them to secrete their natural mucus in greater quantities than is sufficient for the purposes of nature ; and which, in this particular species, when secreted, is either really of a tougher, or more viscid consistence than natural, or is disposed to become so from rest and stagnation."

"THE disease I have described appeared evidently to be of an infectious nature : all infection must be owing to something received into the body ; this, therefore, whatever it is, being drawn in by the breath of a healthy child, irritates the glands of the fauces and trachea as it passes by them, and brings about a change in their secretions. The infection, however, did not seem in the present case to depend so much on any prevailing disposition of the air, as upon affluvia received from the breath of infected persons. This will account why the disorder should go through a whole family, and not affect the next-door neighbor ; and hence we learn a very useful lesson, namely, to remove all the young children in a family as soon as any one is taken with the disease ; by which caution, I am convinced, many lives have been, and may again be preserved.

"Such are the sentiments which, from an attentive observation of the symptoms and progress of this disease, I have entertained of its nature" . . . . "It has gone too much under the appellation of a sore-throat, and has by many been confounded with the common diseases of that kind, so that parents have often been greatly alarmed where there was no cause of fear, and much terrified where there was no symptom of danger. In truth, the throat, altho' frequently affected, is not the seat of the disease, and many have died where that has been entirely free from complaint ; nor are swelled tonsils, an inflammation in the throat, even where it should happen to be specked, or a palate hanging to one side, any more the marks of this distemper than *a very laborious breathing, a hoarse*



*hollow cough, and a peculiar change in the tone of the voice,* unattended with inflammation, are the signs of a common quinsy."

The disease which Dr. Bard thus described, writes the learned Dr. Mitchill, \* more than fifty years since, "has puzzled the physicians who have read his publication. For Cullen, the acute nosologist, places it in the list of work on the cynanche maligna; while Albers, the successful competitor for the Bonapartean medal, quotes it as a treatise on cynanche trachealis. The former classes it with writings on the malignant or ulcerous sore-throat, while the latter ranks it with the publications on croup or tracheitis infantum. It is remarkable (continues the learned Doctor) that Cullen should have mistaken the malady for cynanche maligna, since the three dissections of children, who died of it, all proved the existence of a tough lining of inspissated mucus or lymph in the trachea. That great man was probably misled by the name of sore-throat distemper, by the symptom of troublesome ulcers behind the ears, and by the opinion of the author that it was of an infectious nature."

How strange and yet interesting these declarations of the learned men of one hundred, or even fifty years since, appear in the light of the modern doctrines of semeiology and pathology! And with how much greater respect do we regard the clinical acumen of the distinguished Dr. Bard, whom we are proud to recognize as the author of the first American treatise on the Art and Science of Midwifery!

This small tract was translated into the French language by M. Ruett, and published in Paris in 1810, more than ten years before M. Bretonneau's first paper appeared.

Will any Fellow of this Academy, from this time forward, despise the day of small things, or consign to collectors of rags or paper stock the pamphlets, or old editions of medical

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\* A Discourse on the Life and Character of Samuel Bard, M.D., LL.D. By Samuel L. Mitchill, M.D., LL.D. New York: 1821.

works, which he may weed from his library or garret? Will not all bear in constant remembrance that here, in this our own Medical Home, will be gratefully received and carefully treasured every tract, pamphlet, book, manuscript, engraving, portrait, small or great, which may be donated?

And, finally, Fellows of the Academy, this Institution can only advance in the estimation of the profession by the most persevering labor of each one of us. The science of medicine claims from its votaries the most persistent devotion; and any contribution made here to that science, or to any of its departments, by the younger members of this Academy, will secure for them respect as profound as that given to the eldest Fellows among us. And here, before entering fully upon a new term of service, let me ask every one of you: Does the medical world belong only to the generation which inhabits it? Is it not rather an entailed estate, the income of which the present possessors have the right to enjoy, but not the right to squander or scatter? Are they not in honor bound to preserve the estate intact, institute and develop such permanent improvements as will tend to meet the wants of the generations which will follow? Such are the dictates of a generous philanthropy, which emanate from a proper love of mankind, and have the approval of that sound judgment which is strengthened by observation and matured by age. Let not, then, those who have labored for years past to build up here an institution that shall advance the best interests of medicine, and at the same time be as free as possible from the follies of the profession, become weary in heart; the design is being steadily carried into effect, the end can be surely reached—the object will, by persevering effort, be accomplished.

Again, fellow associates, let me ask your indulgence while I announce and discharge to you any the duties which your favor as a society and as a community require.



NEW YORK ACADEMY OF MEDICINE.

1878.

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ANNIVERSARY DISCOURSE.

BY

WILLIAM H. THOMSON, M.D.

# NEW YORK ACADEMY OF MEDICINE,

INSTITUTED, 1847. INCORPORATED, 1851.

12 West Thirty-first Street.

Regular Meetings, First and Third Thursday Evenings in the Month.

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*LECTURESHIPS FOR PHYSICIANS.*

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AN

ANNIVERSARY DISCOURSE

*DELIVERED BEFORE THE NEW YORK ACADEMY OF  
MEDICINE, DECEMBER 5, 1878.*

BY

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tension of it, similar to the forgetfulness of the dead languages which befalls the majority of our academic graduates. But though the real reasons are very different, and indeed redound to the credit, rather than to the discredit, of our science, yet they are none the less operative as one of the trials of our professional life.

This particular disadvantage under which we labor is fully brought out by the contrast of its well-nigh total absence in the case of our honorable friends, the members of the legal profession. To the lawyer, just commencing his career, the phrase "keeping up with his profession" has little meaning except that he strive to rise in it. For, if at any future time he find himself well established, he need not fear that he may be then quickly left behind, unless he continues moving along with that general movement of the whole body of his fellows, which knows no halt. A profession like the law, whose greatest lights and most studied authorities belong to past generations, need not change very materially, in its requirements, during the present lifetime. To invest in its kind of knowledge therefore, is a tolerably well-insured investment for permanence. In well-regulated countries, the judge dignifiedly settles down into his seat, much as a great ship in the China trade furls her sails as she drops anchor. The long voyage is over, the harbor is reached, with the owner secure, not only in the consciousness that such a cargo as hers can be obtained in no other way than by the identical voyage which she has taken, but what is equally important, that this cargo will always be in demand.

But with the physician, no such anchored future need be looked for. Instead of that, he must expect to find that much of the freight which cost him such trouble to collect and to stow away, is constantly becoming wholly unsalable or going out of market. He must even be circumspect how he displays his wares, lest he be ridiculed for their antiquated character. As well might he enter a circle of modern astronomers discussing a transit, with the talk of the old astrologers, as to mention laudable pus to those who are discussing the migration of white corpuscles. Indeed, while the old lawyer finds himself sur-



rounded by juniors who regard him with a deference most welcome to the human nature of its recipient, the wearied physician finds himself, at the corresponding period, uneasily looking round to note whether his juniors are visiting upon him the sin of his youth, when he asked about some predecessor, the formidable question—has he kept up with the profession?

But it is by no fault of his, nor is it a cause of reproach to him either, that the present standard works on any one of the primary branches of his science, may contain much which may be almost as new to him, and nearly as unfamiliar, as if they were written for some other branch of knowledge than the study of his lifetime. A busy practitioner can no more go over each department of his education at will, than he can be expected continually to renew his youth in all its parts. The most that is usually vouchsafed to his burdened hours is the perusal of the medical journal's reports of new studies or of fresh observations, and which often are about as full and as instructive as a morning journal's reports of the sermons from city pulpits.

But when the time comes for him to look into the text-books which he is to recommend his son to begin his medical education with, we may readily imagine the mental commentary which accompanies the turning over of the multitude of pages. We need only instance, for illustration, the last edition of a long and well-known book for students on General Anatomy. The second volume contains nearly eight hundred and fifty densely printed pages, and as he scans the mere enumeration of the Textures of the Body, he finds their arrangement and forms about as different from what they were when he first studied their grouping, as they would have been if they were the crystals of a kaleidoscope, kept agoing by clock-work. Blood it seems is to be classed among the tissues, because the physiologist likens it to cartilage with its matrix liquefied, and he may well wonder whether he has read much about the blood before, when, besides the lengthy list of its components, he is also told that it ought not to show the presence of fibrin in the body. Under the head of Physical Properties, he finds himself amid the distinctions between

crystalloids and colloids, and under Vital Properties are sentences which tell of intracellular protoplasm, noncellular plasmoids, and intercellular nondescript. Should he now wish to turn to the firmer ground of his familiar solid tissues, the constant recurrence of cuts of magnified diameters are enough to indicate to him what a comparative stranger he was in his student days to the new world discovered everywhere by the microscope; the climax of surprise being nearly reached when he reads that a serous membrane, like the pleura, may be regarded as resembling more than anything else, a lymphatic gland unfolded and spread out thin.

But even the metamorphosis of a serous membrane into an unpacked lymphatic gland, is simplicity itself compared with the maze into which the chapters on the Nervous System will lead him. Beginning with the section on Minute Structure, and ending with Meynert's Terminology, is an appalling mass, not alone of anatomical details, but also of supposed physiological relations of those details, which seem collected for the one purpose of mockery at the capacities of the human memory.

If such be some of the new aspects that develop at the very threshold of the modern temple of Esculapius, what must the case be in those advanced studies which unfold the mysterious processes of Disease? The adequate understanding of recent pathology, in fact often requires, among other things, a familiarity with the most abstruse questions in embryology itself. Thus we are told, in a late production, that the explanation of the structure of an osteo-sarcoma is, that the round cells of the normal medulla are the direct descendants of the temporary cartilage cells, fertilized by white blood-corpuscles, and as these tumors originate in a perverted growth of the round cells of the medulla, therefore some of these cells in the body of the tumor have a tendency to revert to their normal function and form bone, while others are incapable of doing so, in proportion as their perverted or diseased properties preponderate over their proper hereditary action.

The truth is, that from the nature of the case, the extension

of medical knowledge has become so great that the time has long passed since it was possible for any one man to know all that is known about the human body, either in health or in disease. And yet we seem still to be far from the time when our knowledge in any one department may be hoped to approach completion. Each generation of medical graduates, therefore, leaves off in its instruction, much like the readers of a story in a magazine which is not completed in that number, being obliged afterwards to depend upon the allusions of others, who have been privileged with the continuation of the story, in order to hear how some of the interesting characters turn out, how some of them get buried, and what new ones are introduced.

But if any men have reason to complain of this hardship, it is the members of the American medical profession which must feel it the most keenly, owing to the consciousness of the majority of them, that they never heard fully even the beginning of the story, namely, when they were first students of medicine. New beginnings are not always the best beginnings in every respect, and so we find that American processes of education in starting with scarce any inherited regulations, have missed some of the most advantageous customs of European student life, chief among which is deliberateness in the preparation for professional pursuits. Thus in former times, the traditions of all European institutions of learning exacted of the medical student a very prolonged and patient apprenticeship, although the whole body of medical knowledge, and of medical literature, was then of the most modest dimensions, compared with their formidable proportions now. We may adduce here in illustration the original Statutes of the University of Vienna.

After some very proper remarks upon the worth and responsibilities of our calling, in which they say "that medicine is a truly rational science, both as to its theory and its practice." A pastor, weakly and inefficient in body, injures the Church much. Dukes, counts, soldiers, and the common people, who should serve to protect the State, are, if they lose their health,

entirely useless. It is a recognized truth, and on this we lay most stress, that medicine cares for men even while yet in their mother's womb, and from their birth, through all their life, to their death, both by preserving and curing.

Therefore, it is directed that the candidate for a baccalaureate must have heard lectures upon the work of Joannicius; also the first or fourth of the canon of Ibn Sina, the Arabian, and some work on practice, as that of Er. Rhaji Almansor, the Arabian. If he is a master in arts, he must have heard lectures in the medical faculty for at least two years; if a mere student, for three. He must be twenty-two years old, born in wedlock, and not deformed in body. If princes or others, whoever they may be, shall apply for a degree for one unworthy of it, reference shall be made to the statutes in refusal, and to the oaths which have been sworn by the faculty. A candidate for *licensæ to practise*, if he has a degree in arts, shall have heard lectures on medicine for five years, if not a graduate, for six years. If then he is found fit in knowledge and character, without canonical impediments, and not too effeminate of countenance, he may receive his degree at the age of twenty-six in exceptional cases, though in strictness, not until twenty-eight.

In accordance with such traditions, the European student of medicine expects at the start to tarry long over his curriculum, for very full and long it is—witness the hundred and ten courses of lectures delivered at present in the medical department, as we would term it, of the University of Berlin, including, among the rest, a lectureship on the Errors of Modern Medicine! With us, however, except in rare cases, our medical schools partake of none of the great, though subtle, powers of University life. They are chiefly isolated and strictly private institutions, generally owned by a portion of their faculties, and less known to the general public, and certainly less cared for, than many second-class female seminaries. As their support is wholly derived from their pupils, the exigencies of the average medical student's purse prescribes the length of the course of instruction. The result  
and must be stored as rapidly as possible,

with the effect of rendering our five months of medical lectures, at the rate of eight a day, altogether too suggestive of the five minutes for refreshments at our railway stations, where some of the most varied viands are bolted simultaneously, while much that is paid for is left forever behind.

It is not at all consonant, however, with our present purpose to enter upon the subject of the deficiencies of primary medical education in our country, and our allusion to it is simply to illustrate the fact that one of the most important wants of our profession now, is the provision of some means whereby those who are fairly engaged in the engrossing pursuit of medicine as a livelihood, may yet be enabled to keep their proper places in the rapid march of both our science and our practice. We not only do not begin as well as we should, but after we are fairly engaged in our daily business, we are worse off than many of our European brethren in those facilities for *adult* education, as we may term it, which is nevertheless an indispensable requisite for either duty or progress. Such education, moreover, can be imparted only in accordance with the conditions of a practising physician's necessary routine of work, for this of itself involves a living expenditure which leaves little enough to spare for extra demands. It is indeed not fair to charge him with indolence as the reason for failing to keep with the front of the general advance. It is true that he can obtain now both better books and better periodicals than ever before; but what man is there among us, who, perhaps after years of much longing to get a practice, has not, after gaining his aspiration, made the unwelcome discovery that his practice has also got him? When his leisure hour therefore arrives, it is also the hour of fatigue, and the flesh protests against the spirit which moves him to take up the last weighty folio. Any studious course of medical reading implies not only the time, but also the mental state for it, and both may be felt as totally inadequate to the task of beginning, with a lively hope, the perusal of our encyclopædic histologies or pathologies.

The practical question then arises, how can these needs of the active profession be met, for met they should be in some



way or another? In the first place we may shortly dismiss the suggestion that our medical schools might be made to answer this purpose. If the multiplication of such institutions, for the profession of the whole country to share in, the wide scattering of their lights, if this could do it, then the world can show no country so specially favored as ours is in this respect. There is scarce a city of any size in the Great Republic that has not at least one, and even some villages can boast, if such a thing is ever done anywhere, of their medical colleges. But however excellent many of them may be, and however well up to the requirements of our times in the instruction which they afford, yet our schools are not, and never will they become, schools for both students and their preceptors at the same time. The wants of the veteran are not to be provided for in the same way as the wants of the beginner, even if they be the same wants. There is a manifest and practical unfitness in any plan which would invite to the lecture room, men and boys equally. Moreover, the actual facts of the case are, that the lecture courses of our colleges are almost universally ill arranged for the pupils which they do have—for the tyro, who is just learning the names of the cranial foramina, hears just the same lectures as the student who is ready for his examination.

The creation of medical societies is undoubtedly intended to subserve the purpose which we have in mind, and in the case of large cities, notably in our own, they would appear to be admirably calculated as media for the interchange of medical gifts and acquirements. With our hospitals and educational institutions in as great number, variety, and of as undoubted excellence as many of them are, it would seem that we have here but to call our forces together to have every one that will, share in all the treasures of medical knowledge. And it must be said that our associations are well constituted, both as regards their aim and their organization, for awakening an interest in our scientific progress, and in calling out examples of it in the papers, and discussions which form their proceedings. But the experience of medical societies, however, is the same the world over. If they depend solely upon the papers that

are read before them, from time to time, for the interest which the profession will take in them, then the life and the activity of the association are of an intermittent and fluctuating character. Good single papers that can be read through at one sitting, are necessarily not to be expected or depended upon uniformly, and are, as likely as not, to be followed by weak or indifferent productions. Something more than occasional advantage is requisite to insure a steady and therefore effective, influence, which will tend to crystallize about a medical association the talent of its ranks, as well as call out the exercise of it to the mutual advantage of the members.

A suggestion of one of the ways in which a medical society of high standing may afford an opportunity for conferring a great benefit upon the profession of its locality, and thus by reflex influence increase its own efficiency and prosperity, may be deduced from instituting a hypothetical case. Suppose a gentleman has devoted himself to a particular investigation, whose importance would ensure a wide-felt interest in any well qualified exposition of the subject, where can he turn in our country to find his proper audience? Not to the medical society as at present organized, because the limits of one, or at most two, papers or essays read at an ordinary meeting, impose conditions which practically neutralize any such design. The experience of the civilized world in fact demonstrates, that for a systematic exposition of any scientific subject, the form of the lecture is simply indispensable. But the entire proceedings of a society meeting, from the coming to order and reading the minutes, to the motion for adjournment, are as foreign to the natural belongings of a lecture as can be imagined. While therefore, in a few exceptional instances, medical societies have requested some detailed statements or addresses by distinguished individuals on the subjects with which they were specially conversant, yet such proceedings have never been according to any settled system. In most instances, therefore, where men of distinction have wandered, to New York at least, they have been secured by some one of the medical colleges, and the profession has been invited there to hear them. The disadvan-



tages of this method for reaching a truly representative audience need not be stated. Hence, there being no place, so to speak, for a lecturer to physicians, instead of a lecturer to students, therefore there are no such lecturers.

But is there no want for such lecturers? We can only reply that considering all the elements of the case, it is a matter of wonder that both the place and the lecturers have not been in existence long ago. The profession of New York has now, and long has had among its fellows, men qualified to fulfill all the requirements of such a post on the one hand, and, on the other, there are great numbers of us who would be only too happy to avail ourselves of the privileges thus afforded. There is not a department in the wide field of medical research which is without its representation of New York workers. If we need to know how much has been gained in any direction, or what the drift of the best opinion may be relative to any question of general interest to us, we have those among us who can be called upon to make us acquainted with all that is worth knowing thereon. That a truly representative man, moreover, should fail here of an audience is very unlikely. It matters not how gifted a modern physician may be, or how extensive his learning, yet there exists no physician now who has not a great deal to learn still, and the certainty is, that the greater his advance, the more welcome to him will be any opportunity that enables him to hear a few good lectures on a given subject, rather than that he should be obliged to read a good book on that subject.

For we need only ask of some recognized leader among us, and he will tell us that there is nothing so alarming at the present day as the rapid increase of the difference between the amount of medical knowledge which one can buy for the library shelf, and the amount that can be stored in the head. Of the making of books there appears to be no more end now than ever, and if we can keep up only by patronizing the publisher, then nothing can be more partial than the medical knowledge of the best among us. On this account we must have recourse to other methods, in part at least, for informing ourselves of that of which we ought to know something, and so far it must



be said, that we have no better process practically than to have one of our fellows tell us about it, face to face, with all that wealth of language which the living voice and the living presence can convey, but which is inevitably missed from the printed page.

A well-trained lecturer possesses the immense advantage over the author, of being able, by the conditions of his task, to arrange the different parts of his subject into the proper perspective that will allow of a rapid view of the whole. His work resembles that of a painter, who groups the elements into a picture which needs only to be seen to be remembered. The author, on the other hand, is more like the map-maker who puts down every detail according to the scale of measurement. But how often it is that the picture gives the mind that which it can carry without mistake for years, while the more methodical map has to be referred to again and again, for that which seems somehow to adhere only to paper rather than to be transferred to the mental library.

In the interest, therefore, of our fellows, and of each of us individually, it would seem highly desirable if some centre could be provided for true professional education as such, of a more systematic kind than the means hitherto afforded by any of the agencies which we have had among us. Without presuming, however, to advocate it as a measure, I would nevertheless beg leave to suggest whether the New York Academy of Medicine may not at some time consider the advisability of instituting, in connection with its other functions, one or more endowed lectureships to be delivered to its fellows and to the profession generally, which should consist of courses of three, six, or some such limited number, of discourses upon subjects of true professional interest. The relations of the Academy to the whole body of the profession are such that its fitness for this purpose would be cheerfully recognized on all hands. Moreover, experience would seem to show that official or quasi-official organization, working through recognized and definite methods, succeeds better than simple individual association, for the promotion not only of scientific acquisition, but also for the diffusion

of Physicians for Medical Monographs, but which he insisted should be named not after himself but after Dr. John Fothergill. The record of the good works of Dr. Lettsom, of the various enterprises for the relief of the poor and the sick which he initiated and carried through; of the improvements in the construction of hospitals, and of his, the first, society for the reform of fallen women, would by itself be enough to make men grateful for such an example of their human kind. But Lettsom was, above all things else, a physician; and he was incessantly occupied with projects for the advancement of medical science. It was by him that the Medical Society of London was founded, and its constitution drafted, to serve as it has done, as a model for subsequent medical societies. As might be readily imagined, he was not slow to follow the good example of Drs. Goulston and Croone before him, by founding very liberally the course of the Lettsomian lectures, with the further improvement, I believe, of not hampering them by any conditions other than the good conscience of the lecturer would impose. In this respect, indeed, all those who meditate enterprises of the kind in the future might profitably learn a lesson. It is most unfortunate to hedge in by present conditions the future conduct of our successors.

The history of endowed lectureships indeed abounds with many whimsical contrasts between the conditions laid down by their founders and their fulfillment in subsequent times. At present the fellows of Harvard University, who I believe are all Unitarians, are obliged, four times a year, to have some one come and fulfill to all the students the duties of a Duddlein lecturer. The first lecture of this course must be on the Evidences of Natural Religion, the second on the Evidences of Revealed Religion, the third on the Errors of Episcopacy, and the fourth on the Damnable Errors of Popery. The original provision for the reward of such discourses was a barrel of wine and a suit of clothes. In the world of science it may be supposed that we need fear no such coming amusement at *our* modes of thought. But some medical lectureships have narrowly escaped being wedded forever to the use of the lancet,

is for aiding others in the acquisition of knowledge. The names of these founders are more widely known, with some of them centuries after their death, than they were ever known in life. In 1684, Dr. William Croone devised by his will a lectureship to be delivered before the Royal College of Physicians, to which, however, he tacked a condition of a sermon also to be preached, for the edification of the fellows, at the church of St. Mary-le-Bow. The property, then known as the King's Head Tavern, in Lambeth Hill, was devised in trust to supply the funds. Among the many instances that may be named from that early date of Croonian lectures which have marked the different epochs of medical progress, we may cite the work of Murchison on Diseases of the Liver as one of the latest examples of the continued good fruits of a will made so long ago. The lectureship of Dr. Theodore Goulston, however, dates still further back, and to him therefore belongs the great honor of first devising this means of a good that prolongs what, in Dr. Goulston's case, was a remarkably good life. Dr. Goulston died in 1632 and by his will bequeathed to the college £200, a far larger sum in that day than the same now represents, to purchase a rent-charge for the maintenance of lectures to be delivered by one of the four youngest doctors of the Royal College of Physicians. A dead body was, if possible, to be procured, and two or more diseases treated of, upon the forenoons and afternoons of three successive days, or six lectures in all. This provision for young doctors, however, practically assures, owing to the constitution of the Royal College, only men who are in middle life, but at the same time in the full vigor of their professional activity, and the long list of distinguished men, and of well known medical treatises which have grown out of the Goulstonian lectures, are enough to supply all the arguments that would be needed to stimulate others to go and do likewise.

One of the finest characters that could adorn not only the ranks of a particular class of men, but of a race of men as well, was that of the wise and good old Quaker physician, of London, John Coakley Lettsom. With a modesty characteristic of him, he founded, in 1773, the great prize of the Royal College





NEW YORK ACADEMY OF MEDICINE.

1879.

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# VALEDICTORY ADDRESS

*DELIVERED BEFORE THE NEW YORK ACADEMY OF  
MEDICINE, JANUARY 16, 1879.*

BY

SAMUEL S. PURPLE, M.D.,

RETIRING PRESIDENT OF THE ACADEMY.



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### *FELLOWS OF THE NEW YORK ACADEMY OF MEDICINE:*

FOUR years ago, by your kind partiality, for which I feel deeply grateful, I was called to discharge the duties of President of this Academy. To-night I come here to surrender my stewardship into your hands. During my official service experience has prompted thoughts, and convictions have been formed, which if rightly understood, may promote the welfare of this institution. Before giving place to him whom you have with so much unanimity chosen to succeed me, permit me to ask your indulgence for a few minutes to give utterance to some of those thoughts which my experience as your chief executive officer for so long a time has suggested. In doing this I will endeavor to avoid encroachment upon the legitimate aspirations of my most worthy successor.

1st. *As regards the meetings of the Academy.*—My immediate predecessor in office called your attention to the desirability of a meeting of the Academy on an evening of every week, with a view to provide for a fuller discussion of the topics presented in the papers read at the Stated Meetings. Experience has continued to demonstrate that the immediate discussion of papers read at the Stated Meetings have proved unsatisfactory. The plan which Dr. Flint proposed, and which I most heartily endorse, was to have discussion follow one week after the reading of the papers, thus affording the needed time for members who have listened to their reading to mature, by study and reflection, the thoughts which they might desire to offer on the subject; and also for your presiding officer to detail one or more Fellows, familiar with the subject and the author's views,

to lead the discussion. This would, there is no doubt, be an advance in the right direction. Besides, there would ultimately grow out of such a measure a collateral advantage: it would tend to draw to the Academy, from such Fellows as may be engaged in special investigations and practice, a class of papers of great interest—papers the reading of which are now in a measure confined to the several small societies which have a limited membership and a feeble vitality. By such a plan inducements would be held out that will make it for the interest, as we doubt not it is the desire of our intelligent friends of the different specialties, to lay before the greatest numbers of the profession the results of their mature investigations and practice. Where then, let me ask, could they reap a greater harvest of renown than would certainly follow the reading of their papers before this Academy?

2d. *Of the fellowship, initiation fee, and annual dues.*—The conviction has been reluctantly forced upon my mind that the initiation fee, which at present is five dollars, is far too small an amount, considering position and privileges conferred upon the recipient by the Academy's Fellowship. I recommend that it be placed at twenty dollars at least, and that it be used, as now, for the current expenses of the Academy. As regards the annual dues, our present By-Laws make no provision for compounding this tax. I believe this should be permitted; and provision ought to be made which would allow any resident Fellow, who has been a member for five years, and who is qualified to vote at the annual election, to compound his annual dues by the payment of a sum of money, to be determined on the principles guiding correct life insurance. The plan could be easily prepared by a committee of your Council, and when agreed to by the latter, should be recommended to the Academy in the form of a By-Law;—the full amount of money paid to the Academy for composition fees, in lieu of annual dues, to be added to the general permanent fund; but the interest may be used for the current expenses of the Academy. The adoption of such a plan would most certainly strengthen the permanent bonds of this institution, and also cement more

firmly its Fellowship. In support of the feasibility and utility of this proposed measure, I will state that the principle has been in part adopted by one of the most prosperous medical societies of London, and been found to work well, and has proved advantageous to both the Society and its Fellowship.

The proposed institution of a scheme to provide, in the Constitution and By-Laws of this Academy, for the establishment of a class to be denominated Benefactors, is a measure worthy of the careful attention of every Fellow. After giving the subject my serious attention, I most heartily commend the project to you for adoption. This I am the more inclined to do for the reason that this Academy has already received tangible evidence of the inherent interest felt by the profession and the public in its efforts to advance the best interests of medical science.

The changes made by death in our Fellowship during the past two years have been unusually great: Andrews, Beales, Bogert, Buck, Budd, Clarkson, Hirsch, Kilbourne, Paine, Parigot, Peaslee, Randolph, Schirmer, Stanley, Stirling, Snelling, Wilkes, and Wooster, have been stricken down in our midst. Each appreciated and honorably discharged the obligations of their membership; none more so than Peaslee, who, though being dead, yet speaketh to us in his noble deeds and in yonder striking likeness: for who is there that will doubt that his example, as well as his great literary labors, shall live in all future time, or that his disinterested acts of benevolence—his thoughtful interest in this institution—will be remembered as long as medical men shall here congregate and labor for the good of their time-honored profession?

3d. *Of the Library: its growth and usefulness.*—Within the past two years the Library has been thrown open to the *free* use of the profession and the *public*. The wisdom of this measure has been clearly demonstrated by the fact that a large and constantly increasing number of readers, both of the profession and the public, have availed themselves of the privileges thus offered. The increase in donations also, as in numbers of consultations, has been notably great during the past months,

as shown by the registers—the full details of which have been presented to you in the semi-monthly reports of your Library Committee. This Library has developed in such degree, that to simply say it is remarkable, falls far short of the fact. No public library in this country, with as limited moneyed resources, has ever grown like this; and, under the auspices and care of this Academy, I believe no other will keep pace with it (except that having the patronage of the General Government at Washington). From its inception I recognize the inherent love for this institution that predominates in the medical profession of this city. Permit me to summarize the results which have come from the adoption of the measures recommended to you:

1. It has caused liberal and valuable donations to the Library.
2. It has rendered accessible information to all, and in particular to a deserving class of the younger members of the profession, who, from lack of income, are unable to secure such privileges by purchase.
3. It has placed this institution with that class which under the law is exempt from city and State taxation.

But, Fellows of the Academy, we must not rest here in our labors to promote the interests of the medical profession in this great city. The time has arrived when this institution can still more fully establish definite claims to usefulness, by instituting a circulating department in its Library—utilizing its present resources by allowing the duplicates, which already number more than two thousand five hundred titles of books, pamphlets, and volumes of medical journals, to be used for circulation. I would therefore recommend you to establish a circulating department of the Library, and invite donations for the more complete perfection of this object. The expense of such a measure need not be great, and there are good reasons to believe that the cost would be readily provided. Such, at least, is the opinion of those who have carefully considered the subject and have measured the difficulties which appear to lie in the way of its accomplishment. The common assumption, that the number of books which a Library circulates in our profession measures its usefulness, is without

doubt a mistake. He who seeks the privileges of such a Library is generally in need of a monograph, pamphlet, or a medical journal which contains an important fact, or article on a particular subject; and these constitute the class of duplicates which most abound in our Library, and which in future are certain to increase. Then, again, by the establishment of such a measure you would extend to the younger and deserving members of the profession additional aid and sympathy in their labors—privileges which to the recipient are so grateful, and to the giver would certainly, in this instance, prove a powerful element in advancing the best interests of the profession.

4th. *Of the necessity of a closer union of the community of our Fellowship, and of the resources of the medical profession in this city.*—To most effectually accomplish these results, there are measures which ere long will of necessity come before you, and that ought to be carried into effect without causing division of feeling or interest—measures which would greatly redound to the good of the whole profession; and I feel quite confident that the good sense and calm judgment of my successor, aided by the resolute support of the active and working portion of the Fellows of this Academy, will be competent to devise and execute plans which will concentrate the literary resources, arouse the dormant zeal of lukewarm members, and enlarge the social bonds of the profession in this city—results greatly to be desired.

As bearing upon this matter, how praiseworthy the actions, and how cheering are the results which have followed the united efforts of our *confrères* of a sister city, in centralizing the literary resources of the profession, and in offering increased facilities for social intercourse. And here let me ask you all these questions: Is it possible that a more damaging censure to the profession in this city can exist than is now heaped upon it by those who, wrapped in their selfishness, limit the resources and thereby impede the progress of literary and social improvement in our midst? Has it not been demonstrated, over and over again, that, in all large communities or cities, the good order, the effective power, and the beneficent influence

of the medical profession, greatly depend upon the harmonious movements of individual members, as well as of its various societies ; and that in all efforts which are put forth, and which have for their aim the correction of existing evils—the honor and good of society—it becomes the sacred duty of individuals, and still more so that of societies, to subordinate personal interests, if not opinions, to the advancement of professional and public good ? And that party who fails to recognize early these facts will, ere long, be left to the gallings of a chiding conscience and the scathing condemnation of their medical brethren.

It must be obvious to any discerning observer that the unity of our profession, as well as that of all others, is greatly promoted by the cheerful reciprocity of the usual forms of social intercourse, and that it is the bounden duty of all of its members to exhibit to the community the oneness of the regular profession—its separateness from all that savors of irregularity or empiricism—and to promote, even at the sacrifice of personal opinions, a closer interchange of views and a higher regard for all efforts which are put forth to elevate the standard of professional excellence and sustain the honor and dignity of the medical profession.

And now, Fellows of the Academy, before I pass to the close of these desultory remarks, it becomes my duty to remind you :

1st. Of the necessity of active measures in the matter of the early liquidation of the mortgage on this property.

2d. Of the great need of more enlarged accommodations for the Library, and also for the general meetings of the profession.

Of the first measure I feel confident that the energy and zeal of my successor in office will certainly be equal to the emergency ; while of the second measure it affords me the greatest pleasure to now state to you, that I am authorized, by a very worthy and distinguished member of the profession, who has called upon me and has manifested his appreciation of your liberal efforts to advance the social interests of the



profession, by a pledge of FIVE thousand dollars of the amount (seven thousand dollars) required to build the extension and make the necessary alterations of this building according to the plans which were submitted to you by your Committee on Ways and Means in 1875. The only condition of this noble benefaction is, that this Academy shall raise the remaining *two* thousand dollars. In view of this generous offer, can we not raise, before the close of this evening's exercises, this amount? If so, the desired improvement will be made, and our accommodations will be ample for the whole profession.

But, fellow members, I will detain you no longer. The time has arrived when it remains only for me to thank you, one and all, for the uniform courtesy which you have shown me on all occasions and in all my shortcomings, and to express my most ardent wish for the future success of this institution.

And to you, Mr. President-elect, it becomes my duty now to place in your hands the Constitution and By-Laws of this Academy, and charge you to see well to it that all its obligations and requirements are fully carried out to the better maintenance of the organization. I have no fear, sir, that the elevating and onward progress of this institution will falter under your leadership. You bring to the discharge of the duties invested in the office a large experience and a brilliant reputation; and these, sir, will tend greatly to promote the success of your administration. I wish you a greater success than that which has followed any of your predecessors; and I am sure you will receive, in the faithful discharge of the duties of the office, the hearty and warm support of every Fellow of this Academy.



AN  
INAUGURAL ADDRESS

*DELIVERED BEFORE THE NEW YORK ACADEMY OF  
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BY  
FORDYCE BARKER, M.D., LL.D.,  
PRESIDENT OF THE ACADEMY.



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## INAUGURAL ADDRESS.

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### *FELLOWS OF THE NEW YORK ACADEMY OF MEDICINE:*

WHILE deeply appreciating the honor which you have conferred upon me, I must acknowledge that I received the intelligence of my election with no feeling of exultation, but rather with a sense of anxiety and apprehension. Remembering the object and purposes of the founders of the New York Academy of Medicine, what it has already done, and what its future must be, if it adequately accomplish its mission, reflecting how much depends upon the zeal, energy, tact, and sound judgment of the one selected to act both as its executive chief and its most laborious servant, and recalling the names of my distinguished predecessors in this chair, the dead and the living, I can but feel painfully conscious of the difficulty of filling the ideal which the position demands.

It is now thirty-two years since all the best men of our profession in this city, as I have been informed, united in organizing this Academy. The necessity for such an organization was apparent, and good men and true co-operated to accomplish the result. They fully appreciated the great good which such an organization might effect, in stimulating its members to greater mental activity, to higher culture, to contributions to the literature of the profession, to the cultivation of social intercourse and the intimacy of personal relations which break down prejudice, prevent depreciation, and develop the feeling of common brotherhood, thus most effectually conducing to place the profession in such public estimation as is its due from its high aims, its importance to the community, and to the well-being of society. Its objects, as formally defined in the

Constitution, are such as must be heartily approved and zealously sustained by every honorable and high-toned member of the profession. Its aim was not the mere culture of a special department, but was broad in its scope, taking in the whole domain of our professional work.

It may now be pertinent to inquire how far it has been successful in accomplishing its mission, what it has done for its members, what it has added to literature and science, and what influence it has had on the profession and the public.

I shall not attempt to picture the state of the profession as regards its ethical relations to its own members and to society, its standing in public estimation, its work, either in the direction of medical societies or in the way of contributions to literature and science, previous to the organization of the Academy of Medicine, for of this I am not competent to speak from personal knowledge. But I may refer to the progress which has been made in all of these directions since that time, and which I think is due in a great measure to the influence of the Academy.

Thirty-two years ago there was no public medical society in this city the proceedings of which were reported, or which added to the common stock of the scientific literature of the profession.

The New York County Medical Society was dragging on a mere organic existence by keeping its offices filled, but was doing no scientific work and had little influence on the ethical condition of the profession. The Pathological Society was just commencing its useful career; and long may it continue its noble work as an efficient contributor of positive knowledge and a teacher of young and old in a most important branch of our science. There were doubtless many societies, semi-scientific, semi-social, doing much good in this way; but their usefulness was chiefly limited to their own circles.

Since the early period of its history, New York has always had some bright and shining lights, who, by their abilities and acquirements, their able medical writings and their brilliant achievements in surgery, have secured an honorable record in the annals of our profession. But I think my seniors now

present will confirm my assertion, that the general reputation of the medical profession of New York, outside of this city, before the organization of the Academy of Medicine was, that it did less for literature and science than it should, and that it was chiefly devoted to its pecuniary rewards. While, from a careful examination of the medical periodical literature previous to this time, I have become convinced that this reproach was in a great measure without just foundation, yet it must be confessed that the number of works by New York medical authors could almost be counted on the fingers.

I cannot speak of the standing and influence of the profession in the community, or of the social relations of its members with each other. I have heard many stories of the rivalry and hostility of its most eminent men; how they denounced each other as knaves or fools; how they criticised the practice or the operations of those who were not of their special cliques; how pleasantly they repeated the slanderous gossip or the truthful anecdote which injuriously affected the personal or professional reputation of those who were deemed rivals; and how all this destroyed the reliance of the public in the profession as a body, leaving only such personal confidence as individuals might secure; and how all this contributed to prepare the public to accept readily the pretensions of quackery and to receive with open arms new systems and new schools, however absurd, transcendental, and opposed to common sense might be the theories on which such systems and such schools were based. But all this was so long ago, let us hope that none of these traditions were true, for in the present rapid advance of professional progress, thirty-two years constitute a long era.

Within this period, the New York County Medical Society has become a most useful and active working body, and has brought out many valuable and scientific papers, which have been well and ably discussed before large professional audiences. In addition to its scientific work, it has, by the laws of the State, important ethical duties in protecting the community from dangerous and irresponsible pretenders as medical practitioners, and also in preserving the professional morals of all

regular and authorized physicians. Some of us have had the opportunity of learning, during the past year, how faithful it is to these duties, and how sharply it looks after any errors in conduct, whether committed wilfully or through thoughtless inadvertence. As most, if not all, the Fellows of the Academy are members of this Society, we as a body can but feel the greatest interest in its work, and regard it as well worthy of our confidence and support, and we must deem it a misfortune to the profession and to science if it be not kept up to its present high standard of excellence. He who would attempt to elevate the one by depreciating the other is a common enemy, alike to the Academy of Medicine, the New York County Medical Society, and the profession of this city.

We have also many other societies which are devoted to the cultivation of special departments of medicine, and are accomplishing much in their spheres by inciting men to work. I venture to suggest to the candid consideration of all honest and disinterested minds whether much of this work might not be done more effectively and more profitably in the appropriate sections of the Academy, as in this way the aggregate results would be brought out more prominently for the benefit of the whole profession.

The scientific work which the Academy has done is very much more than is generally supposed. It has published five volumes of Transactions, and four volumes of the Bulletin, in all more than four thousand and two hundred pages. If to this be added the papers which have not appeared in either of these volumes but have been published elsewhere, being chiefly the papers and the discussions of the past two years, the aggregate of the printed work of the Academy is more than five thousand octavo pages. I have recently looked over our published volumes with special reference to the quality and value of the work which has been done, and I am confident that the verdict of every one competent to express an opinion must be that it has been worthy of the Academy. Some of the papers which have been read before the Academy must still rank as the best that have been written on the subjects considered.



The discussions of many topics which have been brought before us have been able and thorough. Many such might be referred to as of remarkable merit. Our discussion on puerperal fever was the inciting cause of one on the same topic by the Academy of Medicine of Paris, which was continued more than a year. Where is there to be found, in medical literature, in any language, a more thorough, able, and exhaustive discussion of albuminuria, in all its bearings and relations, than appears in the publications of the New York Academy of Medicine? I might refer to many other papers and discussions. It is really surprising to note how many of the profession of this city are ignorant of, or regard with indifference, the scientific work which has been done here; but it illustrates the tendency to overlook and ignore what is directly under our eyes.

The powerful influence which this Academy has exerted on the profession is by no means fully represented by the work which it has done as a body. No one has so clearly and so eloquently pointed out the great good which such organizations accomplish in making additions to professional knowledge, and giving an impetus of the most forcible and purest kind to the advance of knowledge in the future, as Sir William Jenner, in the opening address before the Section of Medicine of the British Medical Association. We shall all agree with him in the statement, that they enable men to bring before an audience, capable of appreciating their worth, observations and conclusions founded on those observations. The consciousness that their labors will certainly be laid before an appreciating audience, and be by them at once submitted to oral criticism, stimulates men to labor with greater zeal, to test again and again the accuracy of their observations, in order themselves to detect their flaws; to think out for themselves the objections that may be taken to their methods of observation, and the arguments that may be adduced against the accuracy of their conclusions. Thus the zealous worker is stimulated in his zeal, the accurate observer is encouraged to yet greater accuracy, and the logical reasoner more closely trained to

admit even to himself only the most strictly deducible conclusions.

The discussions which follow awake in those who take part in them, and in those who are listeners only, new ideas, and give form to ideas before imperfectly formed in their minds, and do that which is for all men so essential, force them to think. For intellectual and scientific progress, the giving to others, and the receiving from others, ideas is essential ; for the circulation of ideas is as necessary for scientific and intellectual life and growth as is the circulation of blood for physical life and growth. The ideas of others are the seed of new ideas in ourselves. We give—we receive ; and new ideas are begotten ; a third, differing from its parents, is the outcome of the two. The new ideas thus created, open out wider fields for research and fresh methods of testing the value of the results of research. Again, as men talk one with another, new modes are discovered of looking at old things ; prejudices fade away, identity of fact and meaning are found to underlie differences in words ; and by comparing their own observations and their own conclusions with those of others, they correct the former and rectify the latter. Men's minds are excited to think in new directions, and to carry their thoughts into action, and prejudices, those drags on the acquisition of knowledge, are lightened ! How true it is that such organizations not only give the profession the intellectual advantage flowing from intellectual and scientific communion, but also social and moral advantages ! Our hearts are opened to feel more kindly to all of our professional brethren. We become conscious of a real common brotherhood. We find ourselves, we know not how, regarding facts morally, as well as scientifically professional from others' points of view ; appreciating more highly the merits of others, and looking less hardly at their faults ; feeling less confident that we are right and others wrong ; estimating our own merits somewhat less highly, and our professional brothers somewhat more highly ; rejoicing that a new fact has been discovered, or a new and more correct conclusion drawn from old facts, rather than glorying in the part we have played

in the discovery ; rejoicing in the fact that a discovery of service to the race has been made, and not in the accident that we have made it.

There can, therefore, be no doubt in the minds of those who, without prejudice, search for causes, that to the Academy is largely due the mental activity which has been developed in later years, by the profession in this city, and which has brought forth abundant fruit in the form of literary and scientific works. Few, perhaps, have noted how many works have been written by the Fellows of the Academy. I cannot give a complete list of these works, but I may mention those which now occur to me, as the following: Treatises, by two of our members, on Physiology, the most advanced, original, and complete which have yet appeared in the English language ; a large work on the Practice of Medicine. Numerous special works, as on Fevers ; on Diseases of the Heart and Lungs ; on Physical Diagnosis ; on Diseases of the Nervous System ; on Diseases of Women ; on Diseases of Children ; on *Materia Medica* and Therapeutics ; on Ovarian Tumors ; on Midwifery ; on the Puerperal Diseases. Works on General Surgery, by two of our number, on Military Surgery ; on Uterine Surgery ; on Vesico-vaginal Fistula ; a Treatise on Fractures and Dislocations ; on the Diseases of the Genito-Urinary Organs ; on Stricture ; on the Venereal Diseases ; on the Diseases of the Bones ; on Diseases of the Ear ; on Orthopædy ; on Pott's Disease ; on Dermatology ; on the Medical and Surgical Uses of Electricity ; and several others, which I do not at this moment recall. Many of these have passed through several editions, have been republished in England, and have been translated into several foreign languages. I think the assertion may be demonstrated to be true, that a physician, whose library consists exclusively of all the works by the Fellows of this Academy, has a better and more useful working library than belonged to a large majority of the profession in this country thirty-two years ago.

It should be the aim of the Academy to aid the profession in acquiring the highest culture and such superior erudition as

can only be attained by access to the literature of the past. For that purpose it has, mainly within the past four years, made earnest efforts to gather a Library which shall be free to all the profession, and which shall contain everything of value in medical literature. How successful it has been is shown by the fact that, four years ago, our Library contained only about four hundred volumes, while now it has more than nine thousand. In one respect this Library surpasses all others, in that it has the most complete set of all the medical journals which have been published in this country. It has also now more than sixty current American, English, French, German and other foreign medical periodicals and transactions of learned societies, regularly received and on the tables; and this number will be largely increased during the coming year. It is no less a pleasure than a duty to express, in behalf of the Academy, its great indebtedness to our retiring President, Dr. Samuel S. Purple, through whose fervent zeal, persistent energy, and unparalleled liberality, this remarkable success has been attained. At the lowest estimate, ten thousand dollars could not have bought for us the precious volumes which he has given to our Library. He will be gratefully remembered by the New York physicians of the future, as well as by those of the present day; and it is to be hoped that such a noble example will have many followers, even though it may be at a humble distance and in a minor degree.

It is a matter for congratulation that the financial condition of the Academy is so excellent, in that its receipts are considerably in excess of its expenses and the interest on its indebtedness of \$10,000, covered by a mortgage on our building; we have also in the General Permanent Fund, in the Library Fund, and in the treasury of the Committee on Ways and Means, the sum of \$1,326. If I were now to put the question, whether, in consideration of the character, standing, and influence of the Academy of Medicine, it be not its duty to set a good example to the churches by forthwith paying off its debt of \$10,000 and removing the mortgage, I doubt not that I should hear a rousing, unanimous aye. It can be done easily, and I am strong in the faith that it will be done speedily.

When this result is accomplished, how rapidly will the time come when our Library will be filled to overflowing, and we shall require more room for our books. How long shall it be before we will cover our vacant lot and hold our meetings in a hall specially adapted for the purpose, elegant, convenient, well-lighted, and perfectly ventilated ; for in this particular also it is our special duty to set a good example.

During the past summer I read a communication in the *London Times*, dated June 27, and signed Rawdon Macnamara, ex-President of the Royal College of Surgeons in Ireland, in which it was stated "that this college was founded just over 100 years ago. It was originally started in a modest building, in one of the back streets of Dublin, but, gaining reputation by the high standard of its examinations, and funds by the prudent administration of its income, it eventually moved to its present site, where it built a college which is one of the handsomest buildings in Dublin, a city the public buildings of which are unusually admired. Within the past year the college has actually expended out of its reserve ten thousand pounds sterling in still further extending its library (now the largest medical library in the United Kingdom) and its museum." It has also the College of Physicians, with its fine hall and library.

Now, my only comment on this is, that Dublin has not one-third of the population of New York, nor does it possess one-twentieth part of the wealth of this city.

Permit me now to say a few words in regard to the work of our Stated Meetings. Within a few years past, changes have been made in our Constitution and By-laws which have greatly added to the interest and the usefulness of these meetings. Most of the organic work of the Academy is now done by committees and the Council, and hence no time is now frittered away in the discussion of parliamentary usage or motions and amendments. No cheap notoriety can now be gained by frivolous speeches on such matters, by those who, from incompetency or from a just self-appreciation, fortunately never take part in the scientific discussions. Those who now attend our meetings are sure to find that the time of the session will be



almost wholly devoted to the reading and discussion of the papers which are previously announced.

It is most pleasing to note how many of the older and more prominent members of the profession are habitually—indeed, I may say, conscientiously—present, while the zeal and interest of the younger members seem to be progressively increasing. Good papers and good discussions are sure to call out full meetings. Even special subjects, which, at first sight, would have apparently but little interest for the mass of the profession, may prove to be most valuable and instructive to all. If I may be allowed to indulge in a personal reminiscence, I will refer to the effect upon myself of one of our meetings a few weeks since. The evening was not one to tempt a wearied and neuralgic man to go out, and the subject of the paper to be read, Eczema, was one in which I did not feel the slightest interest, because I had always treated this affection most satisfactorily to my patients and myself. I suppose that it is my duty to say what my successful treatment has been, and I shall therefore avow that it was simply to send all patients, who consulted me for this affection, to some one of our excellent dermatologists. I attended the meeting solely from a sense of duty, which I think we all owe to those who devote the time and study necessary for the preparation of a paper for the Academy, provided that we have reason to anticipate that the paper will be a good one. To my great surprise I found myself intensely interested, because not only the author of the paper, but the speakers who discussed it, brought out many new facts in regard to the therapeutical effects of agents of which before I knew very little. I was incited, on my return home, to consult every book on therapeutics in my library; and in consequence of listening to this paper and the discussion on it, I am certain that I added more to my stock of knowledge of remedies in this one evening than I had acquired before in a whole year. It was thus made apparent to me how much may be learned from listening to papers and discussions, even of subjects which do not practically occupy me. Although I have nothing to do with surgery, except obstetric surgery, never even opening an abscess if I

can avoid it, yet I am sure that I would be interested and instructed by hearing a paper on the reproduction of bone, or the proper manipulations for the reduction of certain dislocations, or any other surgical paper written by one competent to do the work well. I may even go so far as to avow my belief in the possibility that a paper by one of our distinguished ophthalmologists might have the fascination of the drama and the utility of a sermon, if read at one of our meetings, even if it were filled with new learned words which we had never seen or heard of before, and we were compelled to look up in *Dunglison's Dictionary* the meaning of the title of the paper.

It is to be regretted that some of our prominent men in the profession, who formerly attended its meetings, read papers, and took part in the discussion, are now seldom seen with us. It may be that the flight of time has worn out the professional ardor of their youth, or blunted their sense of duty to the profession, and that they have arrived at that happy consummation when they have nothing more to learn, with no desire to add to the knowledge or correct the errors of others. They have probably settled down in placid contentment, with abundant means, a good practice, and a conceded position. But if the good hearts and sound principles of such could be roused to action, they would cheer and encourage us by their presence, and even if they took no part in our work, they would still be useful members of the Academy by being ornamental. It is to be feared, however, that some such are hopelessly impenitent, and that the final judgment of their contemporaries must be, that, while they were good husbands, fond fathers, excellent citizens, able physicians or skilful surgeons, they were defective in a proper appreciation of their duty to science and the profession.

It is strange that clever men, even looking at the matter from the low level of a selfish point of view, do not see how well good work done in the Academy pays. I know that many others, as well as myself, have been induced to send patients to, and thus put money into the pockets of, those who have read papers, or, in discussions, have brought out new ideas before the

Academy on such subjects as diseases of the rectum, the treatment of pneumonia, diseases of the ear, the relations of certain conditions of the eye to other affections, diseases of the skin, nervous diseases, and many others which I need not mention. Who that was present, a few weeks since, and listened to the remarkable paper "On Six Cases of Abdominal Pregnancy," would hesitate a moment in making a selection as to the proper person to call on for advice and aid, when meeting a case of this kind in his own practice? A sympathetic relation is established between the reader of a good paper and those who are listeners, which, explain it as you may, is not created by seeing the same paper in print.

I wish delicately to allude to another fact. A few—I am most happy to say a very few—of our conspicuous men have deserted our standard, and have resigned their Fellowship of the Academy. This action must have resulted either from misconception or misinformation, bad logic or bad judgment. I shall not say that the Academy can better afford to do without them than they can afford to keep aloof from the Academy, but I may say that it is to be hoped, for the mutual good of both, that some of them may in the future retrace their steps. I think I may venture to say to such, that

"Still the lamp holds out to burn"

(I will not complete the couplet), and that they will be warmly welcomed back, as they would doubtless "bring forth fruit meet for repentance," by good scientific work and by liberal contributions to our Library and our funds. It can hardly be expected of us that we should rejoice more over the sheep that was lost and is found than over the ninety-and-nine that went not astray. We welcome those who warmly sympathize with the aims of the Academy and who will zealously co-operate in its good work. From malcontents, croakers, and pessimists, "good Lord, deliver us"!

It is to be desired that, in the course of the year, we may have valuable and original papers pertaining to every department of medicine, so that the Academy may fairly represent



its progress, in physiology, pathology, the practice of medicine and surgery, obstetrics and gynecology, and each of the specialties. In therapeutics I think it may be claimed that the profession in this country are in advance of their brethren in Europe. This branch of study is peculiarly in harmony with the practical tendency of the American mind. Yet I have been struck by the fact that no paper on a therapeutical subject has ever been read before the Academy or has appeared in its Transactions; while before a county medical society, of Pennsylvania, a paper, entitled "Hints on Specific Medication," by Dr. Edward R. Mayer, of Wilkesbarre, was read and published by the society, so replete with original suggestion and observation that I hope some one of our number may be induced to work in the same direction and rival it in merit.

There can be no doubt that those who prepare papers to read before the Academy will do their best. It is to be hoped that those best qualified by special study and experience to discuss these papers, will make due preparation, in carefully maturing their ideas, and thus secure a facility in clear and lucid expression. We want no crude, ill-considered statement of fact, no frivolous effervescence of the moment. We would humanely spare all from making a pitiable, even though it be a ludicrous exhibition of folly and ignorance. The meetings of the Academy cannot become an arena for the display of garrulous imbecility, pretentious assumption, or, to borrow a phrase from Oliver Wendell Holmes, "the flippant loquacity of half knowledge."

The Academy ought, and the time is soon coming when it will, bring out and distribute annually among its members, to all the medical press, and to all other medical societies which publish transactions, a volume, the contents of which shall be worthy of the best paper, the finest typography, and the most handsome, appropriate binding. If such a volume should have such merits as the profession in this city ought to be able to give it, the demand for it by the profession throughout the country should secure for it, in a few years, a sale which would more than pay the expenses of publication.

# NEW YORK ACADEMY OF MEDICINE,

INSTITUTED, 1847. INCORPORATED, 1851.

12 West Thirty-first Street.

Regular Meetings, First and Third Thursday Evenings in the Month.

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*THE ACADEMY AS A TEACHER.*

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AN

ANNIVERSARY DISCOURSE

*DELIVERED BEFORE THE NEW YORK ACADEMY OF  
MEDICINE, DECEMBER 11, 1879.*

BY

LEROY M. YALE, M.D.,

LECTURER ADJUNCT UPON ORTHOPEDIC SURGERY IN BELLEVUE HOSPITAL MEDICAL COL-  
LEGE; SURGEON TO BELLEVUE HOSPITAL, NEW YORK.



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1879.



## ANNIVERSARY ADDRESS.

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*MR. PRESIDENT AND FELLOWS OF THE ACADEMY:*

SYDNEY SMITH is said to have remarked of the late Earl Russell, "Lord John is neither a surgeon nor a sailor, but such is his self-confidence that at two hours' notice he would cut for stone or take command of the Channel fleet." It has occurred to me that in accepting at short notice the office of orator for this evening, I have manifested a degree of assurance little short of that attributed to the English statesman. Yet, when I say that I have always esteemed the position a peculiarly honorable one, and that it was tendered to me by one of your former Presidents with his matchless persuasiveness of manner, you will, I am sure, cease to wonder that I for the moment forgot my unfitness for the task, and rashly accepted it; and you will, I hope, leniently pardon the absence from my address of that learning and eloquence to which you have become accustomed on occasions like this.

If it were in my power ever to make an interesting address, I should particularly desire to make it now. For never has the Academy been so prosperous, never has its position been so dignified, never have its prospects of a career of long-continued activity and usefulness been so bright as now. And the fitness of things would seem to demand that the address of to-night should in some degree accord with these cheering circumstances.

Naturally, my own memory of the Academy does not run back to the time of which the fon<sup>d</sup> when the Fel-

lows gathered themselves together "in a small upper chamber," "over a coal-yard." That was a day of small things, but a day apparently of earnest zeal for the new undertaking, and of good work done. When I first knew the Academy, its early energy had greatly slackened. Its Transactions had ceased to appear, the Sections had died out, and were regretfully spoken of by those who had known their early vigor, and the general public meetings seemed to be perfunctory and unreal. I recall this period of lethargy with no trivial or derisive intent. It was coincident with a season of inactivity in other societies, and may, in part, have depended upon the immense diversion of thought and energy into other channels, caused by the war which had just been concluded. I have alluded to it only that the comparison of that time with the present, and the consideration of the means that have been efficient in working the change, may give us the greater encouragement, and furnish the greater stimulus to continued exertion.

The renewed activity of the Academy—its Renaissance, so to speak—has been due to the energy of a few of its Fellows, who, appreciating the beneficial results of such a revival, had the intelligence to see how it might be brought about. We know them all, and for their zeal and faithfulness we are grateful to them all; but it is not to-night necessary to again name them, or to attempt to apportion among them the credit of their work. They, least of all of us, would desire it. They wrought for an end because they knew it to be worthy; and in its achievement, and not in any recognition from us, they have their reward.

But I should, I am sure, seem to you neglectful of a duty, and I should deny myself a pleasure, if I were to pass on without a special acknowledgment of the generosity and far-sightedness of that Fellow by whose gift we are enabled to meet in this hall to-night. Had his only motive been a kindly wish to give to his associates a comfortable and commodious place of meeting, with the conveniences for the safe-keeping and use of their growing library, his gift would have been a nobly generous one. But I believe these palpable benefits are but a



ginning—are only the first-fruits of his liberality. Indirect results are ever difficult to trace; and in endeavoring to estimate the effects upon the profession in the city, arising from the possession of this hall, many things are to be considered. Not only the material comfort of a better auditorium; not only the impulse a good audience gives to preparation of papers for that audience; not only the contagiousness of generosity is to be recollected,—but also a host of vivifying mutual influences, half-social, half-professional, which come from the frequent gatherings, from the chance meetings of members in the rooms, each earnestly pursuing some special object of research, and so charged with it that he cannot, even in the most casual chat, fail to give his neighbor a useful thought; influences which come from the ready sympathy and generous rivalry of associated action, and which constitute the value of club-life in its best sense. If, I say, we could trace all these ramifying influences and cross-influences, if we could estimate their power, I doubt not we should find that the generosity of Dr. Du Bois had set in motion forces which will be potent long after these walls have crumbled in decay.

For some reason, we generally regard that which is fixed by custom as more unalterable than that prescribed by statute. When, therefore, I learned that inexorable custom forbade the making a scientific subject the theme of an anniversary discourse, I had not the temerity to attempt an innovation, however enticing. Along the well-worn path trodden by my predecessors I must also walk—*non passibus equis*—looking for thoughts which they disdained to gather, or left untouched as yet unripe for plucking. Over the old field reaped by mightier hands than mine I too must go, hoping to find here and there the handfuls thrown down for the gleaner who comes after them.

Again usage—recent usage at least—renders a medical occasional address incomplete unless it in some way allude to the subject of medical education. I anticipate a look of anxiety upon your faces—I am even prepared to see those who can do so “silently steal away,” when I announce that this is the sub-

ject of my remarks to-night. But let me hasten to reassure you by saying that I do not propose to discuss how medical schools shall educate, but how we here may educate; and less how we shall teach the undergraduate than how we shall teach ourselves. The recent very general discussion of the preparation of students for our profession has been directed, I think, too much toward how we are to control their education, and too little to how we are to help it. There is little disagreement as to the shortcomings of American medical education, and of the disadvantages of the plan of its control; but when the question is fairly put, "how will you improve it, or where else would you prefer to place its government?" the answer is neither prompt nor definite. While we await opportunities, let us see to it that our zeal be not meddlesome. There are, however, some general ways in which we influence, and, if you please, control this matter of preparatory education. Thus, the law of supply and demand is not alone applicable to commercial transactions, and is not limited to any particular occupations. It enters as an element into all human endeavor; it governs not quantity of product only, but quality as well. It controls the quality of the education possessed by the student when he receives his diploma, just as really as it fixes the quality of the coat which he wears on the momentous occasion. Now, every man in taking up any occupation, be it high or low, hand-work or head-work, does so with the purpose not only of extracting from it a living, but also of gaining a respectable position among his associates in the same calling. Ambition and self-respect prompt to this; but, moreover, repute is a recognized agent in the attainment of material success. The higher the occupation, the higher, as a rule, becomes this aspiration for the esteem of one's peers. The proverb, "men, like water, find their level," embodies a principle upon which every one, consciously or unconsciously, acts. As a consequence, a pretty constant relation will always be found between the character and attainments of the actual members of a profession, and the character and attainments of those seeking to enter that profession. For no man will willingly enter an occupation

where he will be received with contempt, and not for long will men crowd into a profession so equipped that they must ever occupy its lowest ranks. And here it is that we who are doctors may powerfully influence those who are to become doctors. Just as by our professional career we set up the standard of demand, so will be the quality of supply. If we, as a body, are thoughtful, intelligent, scientific practitioners, then will the recruits of our ranks be likely to come equipped with scientific and logical habits of mind that will make their practice rational. If we, as a body, are routinists, given to make-shifts, subservient to authority in our arts, then must we look for a larger and larger proportion of beginners who start out with a set of splints to fit all limbs, and a set of prescriptions to suit all stomachs, and who will probably succeed as well as the youth who thought to make a file of his father's old love-letters do duty in a second generation.

Let us now pass to our chief topic of consideration—the Academy as a teacher. How has she taught in the past? How is she teaching now? And in what other ways yet may she be a teacher in the future?

In the past, the Academy has played no mean part as a teacher of the profession in this city. We are apt to accept, as a matter of course, any customary source of profit, intellectual or other, and never to estimate its value. An old teacher of mine used to say, "There are many things which we count little to possess, but which it would be terrible not to have." So, I suppose, only our elder members can rightly appreciate the work of the Academy, as they alone can recall the state of affairs that called for its foundation, and from which it has largely helped the profession to escape. But a fair consideration of the matter will, I think, bring any one to the conclusion that the Academy has been very efficient in the education of the profession in this city, in at least two important ways. These are the first two of the objects set forth in the constitution—namely, the cultivation of the science of medicine, and the elevation of the character and honor of the profession.

The scientific papers that have been presented to this body

during the past thirty years have still a very considerable value. But a part of them have been embraced in the occasional volumes of the "Transactions." Any one who wishes to have an idea of the whole must search the files of many medical journals. But the worth of these papers to us is no fair criterion of their value to their hearers when first read. Judging so, we ignore all the effects of time and changed circumstances. If one could be possessed of all the medical knowledge of to-day, and yet be totally ignorant of its history, he might lay down Paré's account of the ligature, or Harvey's description of the circulation of the blood with a contemptuous "every one knows that." Yes, but every one *did* not know that. Or to take a less exaggerated example: a well informed student, reading the works, let us say, of Sir James Simpson, is likely to remark that the conclusions are much the same as we find in the best text-books. But you, Mr. President, who called that great man your friend, could retort, "The-text books of to-day have these conclusions, because Simpson came to them thirty years ago." The student, who at his ease enjoys all the fruit, little dreams of the giant force that broke the new ground and sowed the seed. So, I say, the papers of the Academy, to the profession of this city, had a value far greater than we, accustomed to all their results, can well imagine.

The second avowed object of the Academy was an ethical one—"to separate," as it was then tersely put, "the sheep from the goats"—and this end has never been lost sight of. I know that the name ethics is often of offensive sound; that it is suggestive of professional bickerings, and of medical courts-martial; and that it does frequently seem that those most familiar with "the code" have become so by their attempts to evade it. But it has not been, I conceive, by martinet-like methods that the Academy has raised the ethical standard, but in quite another way. Any body of professional men, banded together for the purpose of mutual help, having as their chief rules fair-dealing, generous and courteous behavior, by living up to these rules will be more powerful for good than they could be by any amount of *espionage* and charge-making. What a mem-

her fears is not a trial for ethical shortcomings, but the loss of the esteem of his fellows. He dreads the cold shoulder far more than any discipline or inflicted penalty. This influence does not stop with members. If any association really lives up to its generous rules, it becomes to those beyond its pale a sort of aristocracy of good behavior, and its example is more or less distinctly emulated. Of the power that the Academy has exerted in this way for a generation there can be no doubt. Let us hope that the tradition will not be lost. We can afford to be generous with our possessions, but our fellowship we can give only to those who win it by uprightness of conduct.

The Academy early contemplated the formation of a library, fully appreciating its educational power. It even began the collection of books in a small way, but while it had no permanent habitation, a working library was practically impossible. Even the small library that had been formed, for want of lodging did not remain intact. But with the occupancy of the present building the library at once became a living thing. We should not forget how much of the vivifying power came from the zeal and generosity of the late President. The four hundred volumes, which were all that could be found at the opening of the building, grew rapidly through the gifts of Fellows to be a considerable collection. In three and a half years it has reached ten thousand volumes, exclusive of pamphlets. These are books covering a very wide range of subject and of date; ancient tomes are here, and here are the recent issues of the press. Here is already a rich field for the searching student, and yet we believe the collection is but in its infancy. Let me make an appeal to each of you for your help. This collection of books is made up entirely of gifts. Some have given profusely of their riches; others have given less abundantly, but not less earnestly, according to their means and opportunity. Let no one suppose, as he looks along his shelves, searching for something he may give to this library, that anything is too small to offer. The very volume which to you seems insignificant, may be of great value as

completing a work, or as illustrating something else. No one who has been obliged to undertake any kind of medical research will ever look upon any book as valueless. A common objection is, "I have nothing to give away except a lot of old rubbish—books entirely out of date." Several times in my life I have had "a lot of old rubbish" given to me, but out of it I have picked some of the rarest treasures of my library. Remember that it is nothing to the disparagement of a library that it is rich in old books. While we need not say with Chaucer :

" For out of the old fieldes, as men saithe  
Cometh all this new corne fro yere to yere,  
And out of old bookes in good faith  
Cometh all this new science that men lere,"

yet we must feel that an old book, if it were ever intrinsically valuable, still is so. It may have the treasures of original research, or the lessons of practical experience. It will have at least that quaint value of showing the same facts, the same questions, the same perplexities that make up our professional life, considered by minds trained in other times, and under other circumstances. For myself, I gratefully acknowledge that more than once, when I had searched fruitlessly through my recent surgical "authorities," I have learned what I wished to know from Astley Cooper or Charles Bell, or even from more ancient men than they. Knowledge is ever increasing and science grows apace, but the calm wisdom of experience is as often to be found in an old book as in a new one.

The Academy has not stopped with the formation of a library. Books are, after all, the conservators of what is known; the recorders of what is, to a certain extent at least, settled opinion. The daily work of the medical world, its eager searchings, its earnest strivings, find their expression in its periodical literature. In our day of feverish energy and progress, the making of books cannot be waited for. To ask the student of to-day to be content with text-books, would be like asking the Wall Street operator, accustomed to watch the varying re-

cord of the telegraphic tape, to be content with the stock report in the secular column of the religious weekly which his honest rustic father reads with edification. The desire for access to the periodicals of the world has found expression among us by the formation of various clubs of greater or less size. The Academy has endeavored to meet this demand by opening its reading-rooms. So greatly have these been appreciated, that it has been obliged to double its accommodations. Henceforward the readers will have at their command one hundred and twenty-five medical journals, bringing the tidings of our profession from every civilized country, and in every European tongue. Every important periodical of Europe and America will be upon our tables. The entire activity of the medical world can be viewed by the student who takes the room above for his point of observation. Mark, moreover, that there is nothing exclusive in all this; the Academy spreads the tables; whosoever will, is at liberty to partake of the feast.

All this the Academy is doing for the reading-class, the studious element of our profession. Let me recall to you the very earnest plea, made with characteristic force and humor, by the distinguished gentleman who gave the address of last year. He urged the claims of another class; of that, namely, which has no time to read—whose every hour is under the dominion of exacting patients. I allude to the subject, not because anything can be added to the earnestness or wit of his statement of the case, but because it is a matter of too great moment to be let drop, or to be long let lie dormant.

It is a need, not only of the overworked practitioner whose woes Dr. Thomson has so graphically depicted—it is a want almost equally felt by those whose special work drives them to special study, but who would, nevertheless, gladly know something of the progress of other branches, and who dread lest their labor in particular fields should seem to deprive them of their birthright in the commonwealth of medicine. The need, then, is evident; moreover, it is a need that has long been foreseen, for among the duties of the Council, as laid down by the Constitution, it is specified "they shall nominate such Fellows as

are to be appointed, to deliver series of discourses or lectures on scientific subjects before the Academy." Further, the project seems to have the hearty approval of all those most familiar with the working and resources of the Academy. Able lecturers, certainly, are abundant among our Fellowship. Why is it, then, that this educational agency, confessedly so desirable on all hands, is not put into operation? Apparently, simply because the council cannot ask those whom they would choose as lecturers to give their labor gratuitously, and no fund exists which can be devoted to the purpose. If, then, we are to have the lectures, either some of you distinguished men—you whose words, whenever you choose to speak, are listened to with respect and admiration—laying aside your modesty, and recognizing the obligation your eminence imposes upon you, must volunteer; or we must all contribute of our means and appeal to the generous laity, whom we may be able to influence, to form the necessary fund. When we see the lavish liberality of our wealthy men toward institutions of learning, can we believe that if they knew of the opportunity here presented, it would long go unimproved? I feel confident that in one way or another this desideratum is soon to be gained. Let each one of us start out to-night as missionaries in the cause.

This matter of lectureships leads me to another in some measure akin to it. It is now generally recognized that an institution of learning should have at least a double function: That of clearly teaching that which is known, and that of making original investigation into that which is not known. To all the natural sciences our country is making its contributions, as well as being prominent, if not preëminent, in what it is the habit to call "applied science." There is no reason why we should not contribute in like manner to medicine. In the art we are constantly making researches, and if the valuable discoveries in this direction are alone considered, we need not shrink from comparison with any nation since we have had a separate existence. It should be our aim to advance the science as well. But such investigations are generally costly in time and in expenditure. The man immersed in practice



cannot give the time ; the young man with the training for the work, and still free to do it, with the enthusiasm that prompts to its undertaking, cannot afford to take from his slender earnings the means for the prosecution of his inquiries. Our inactivity in the more abstract branches of medicine is not because our eyes are less keen, our ears less attentive, our minds less logical, our patience under obstacles less enduring than those of our neighbors. American students in foreign laboratories do as good work as the best. But it is because the daily needs of life leave nothing for science. Research in America is done chiefly in endowed institutions ; or, despite some glorious exceptions, by those who contend against the debilitating influences of wealth. Our profession here has the material for a truly scientific class, and the foundation of scholarships would do more to develop this material than any other agency I can think of. And this is another means through which I hope, nay, I confidently expect, that the Academy, in a not distant future, will exert its educational power.

Let me detain you by one more suggestion. Is it not possible for the Academy to found a Museum ? I shall not waste your time in discussing the value of museums, as this is quite fully recognized. " But why another ? " some may ask. Are there not enough, and good ones in the city ? If museums are good, there can hardly be too many. We have indeed several good museums : some, like that of the New York Hospital, containing the trophies of a long career ; others, like the Wood Museum, monuments to great personal energy and industry. But the museum the Academy might found would in no way, I conceive, conflict with, or divert from such museums as these. The existence of the great museum of the Royal College of Surgeons has not prevented the growth of the collections of the great hospitals of London. The museums of hospitals and of colleges will always, I presume, be increased by the contributions of those connected directly or by affiliation with those institutions. The great mass of the profession remains unappealed to. If they preserve specimens, they are hidden in their closets. They do not care to part with them

to collections in which they have no personal interest. Much valuable material is thus lost to the student, and generally lost entirely. If the Academy had a museum, I believe that very much would be saved. You have seen how liberally the profession has given its books during the past three years. Were there no libraries in New York before, to which these might have been given? Certainly there were. Were there no books to spare before? Certainly, again. The Academy appealed to givers in a way they could not resist, because they were interested in answering the appeal. So it doubtless would be of all that can illustrate the art and science of medicine, if the Academy should undertake to be its custodian. It is probable, moreover, that many a practitioner who is now indifferent, would collect specimens if he found his trouble could be made subservient to a general good. The hospital and college museums would grow as before, and from the same sources as now, and from the stimulus of rivalry with still greater rapidity, while the Academy museum would garner the harvest from quite fresh fields.

I am but too well aware that I have presented for your consideration nothing new; I can scarcely flatter myself that I have presented old thoughts in a new light. I have endeavored simply to trace the career of the Academy as a Teacher: in the past by the production of scientific papers and by elevating the standard of professional character; in the present by the additional power of its Library and its Reading-room. I have also pointed out some directions in which its educational force might be still farther exerted. These projects are not Utopian; they are all feasible, if further consideration shall prove them advisable; indeed, the germ of them all already exists. If, by this rehearsal, I have brought back to you the consciousness that, as Fellows of this Academy, you are "citizens of no mean city;" and if, especially, I have stimulated you to stay up the hands of those who are so wisely and zealously leading us, my aim has been fully accomplished. How can we fail to have high hopes of the Academy? Its situation is peculiarly fortunate. It is hampered in its work by no offi-

cial restrictions. It is not an association devoted to special studies, nor to narrow special ends. Its aims are broad and catholic—all that may advance our common art. It is controlled by no clique; it is the mouthpiece of no faction; it is rather the common meeting-ground of the best elements of our professional body. To the material advantages of a definite habitation, of growing resources, of a large yet selected membership, it adds the power of age, of character, of authority. If, with all this, the Academy fails to be in the future a great power for professional good, it will be because in some way or other we are delinquent. Let us see to it, then, each and every one of us, that our professional lives be her fair “epistles known and read of all men;” let us strive to liken her halls to “the groves of the Academy where Plato taught the truth.”



PROCEEDINGS  
OF THE  
NEW YORK ACADEMY OF MEDICINE,

*AT THE FIRST STATED MEETING HELD IN THE  
NEW LIBRARY HALL OF THE ACADEMY,  
12 WEST THIRTY-FIRST STREET,  
OCTOBER 2, 1879.*

(WITH ANNUAL REPORTS FOR 1879.)



NEW YORK:  
PRINTED FOR THE ACADEMY,  
12 WEST THIRTY-FIRST STREET.  
1880.

**PUBLICATION COMMITTEE.**

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**SAMUEL S. PURPLE, M.D.**

**GOUVR. M. SMITH, M.D.**

# NEW YORK ACADEMY OF MEDICINE,

INSTITUTED, 1847. INCORPORATED, 1861.

12 West Thirty-first Street.

Regular Meetings, First and Third Thursday Evenings in the Month.

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## PREFATORY NOTE.

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THE NEW YORK ACADEMY OF MEDICINE was organized in the city of New York, on the 6th day of January, 1847, and by a special act of the Legislature of the State was incorporated on the 23d day of June, 1851. This act was amended on the 4th day of June, 1853, empowering the incorporators to appoint five delegates to represent them in the State Medical Society, with all the powers and privileges possessed by delegates from the respective medical colleges of the State. A supplementary act was passed, June 2, 1877, conferring upon the Academy certain trust powers and privileges.

From the inception of the Academy, one of its chief purposes has been the procurement of a building or hall, where its meetings might be held, where a library and museum could be garnered, and where the profession could meet on common ground. The efforts put forth in this direction culminated, in 1875, in the purchase of a commodious building, centrally located on West Thirty-first Street, between Broadway and Fifth Avenue, which has been, as will be seen in the following proceedings, by the generous gift of a worthy benefactor, enlarged so as to cover the entire lot and thereby providing a Library Hall and audience-room, which will, for some time, answer the Academy's wants and those of the profession. The regular meetings are held here on the first and third Thursday evenings in the month (except July and August), at eight o'clock.

The Academy's publications comprise five volumes of "Transactions," four volumes of the "Bulletin," and some fifty

miscellaneous "Addresses," "Memoirs," "Reports," etc. All of these publications are for sale, or will be exchanged for works not already in the Library. The Library now contains fifteen thousand volumes, and is open free to the profession and the public daily (Sundays and legal holidays excepted), from 9 A.M. to 6 P.M., and from 7 to 9 P.M.

By virtue of its Charter the following funds, held in trust by the Board of Trustees, have been initiated :

#### GENERAL PERMANENT FUND.

This fund will enable the Academy to anticipate the necessities for enlarged and better accommodations, which in time must be demanded of it.

#### LIBRARY FUND.

The interest arising from the careful investment of this fund will be used for the purchase of such books as are needed, and which are not likely to come into the Library by gift.

#### FUND FOR LIQUIDATION OF THE MORTGAGE.

This fund will be used solely for the liquidation of the mortgage now on the property of the Academy—the necessity of cancelling which presents strong claims to the attention of the Fellows and friends of the Academy.

Donations and bequests are solicited by the New York Academy of Medicine for each of the above funds.

12 WEST THIRTY-FIRST STREET,

February 18, 1880.

## PROCEEDINGS.

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A STATED Meeting of the NEW YORK ACADEMY OF MEDICINE was held in the Academy, 12 West Thirty-first Street, on Thursday evening, October 2, 1879, at eight o'clock, the special interest of the meeting being the dedication of the new Library Hall.

The President, FORDYCE BARKER, M.D., LL.D., presided, and on the platform were Vice-Presidents Drs. William T. White, T. Gaillard Thomas, James R. Leaming—the five ex-presidents, viz.: Drs. Willard Parker, Alfred C. Post, James Anderson, Austin Flint, and Samuel S. Purple, and the following invited guests: Dr. Henry W. Ackland, Regius Professor of Medicine in the University of Oxford; Samuel D. Gross, M.D., LL.D., Oxon.; George C. Shattuck, M.D., late Professor of Medicine in Harvard University, Boston, Mass.; John S. Billings, M.D., U.S.A., Librarian Surgeon-General's Library, Washington, D. C.; Dr. Freeman J. Bumstead, President of the Medical Society of the County of New York; and Robert F. Weir, President of the Medical Journal Association of New York. There were present an unusually large number of the Fellows of the Academy, and also of the distinguished members of the medical profession of the city and its vicinity. The walls of the new Library Hall, and also of the parlor of the Academy, were decorated with numerous portraits of the founders of the Academy, many of them having been loaned for the occasion.\* The reading of the minutes of the last stated meeting, held May 15th, were, on motion (duly seconded), omitted. The report of the Committee on Admissions was called

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\* See Appendix, p. 60, for a catalogue of the portraits.

for by the chair, and was read by the Secretary of the committee, Dr. E. H. Janes. The report of the Committee on Subscriptions was then called for, whereupon the Chairman, Dr. Joseph Wiener, read the same as follows:

**MR. PRESIDENT:**

The Subscription Committee beg leave to report that the amount collected, when added to the munificent sum given by Dr. Abram Du Bois, is sufficient to complete the buildings and improvements. The names of the subscribers are as follows:

ADAMS, JOHN G., . . . . .	\$100 00
AGNEW, CORNELIUS R., . . . . .	50 00
ALLIN, CHARLES M., . . . . .	25 00
ANDERSON, JAMES H., . . . . .	20 00
ANDERSON, JAMES, . . . . .	10 00
AYERS, SAMUEL, . . . . .	5 00
BARKER, FORDYCE, . . . . .	150 00
BANKS, JAMES L., . . . . .	50 00
BOREMAN, NATHAN, . . . . .	50 00
BLUMENTHAL, MARK, . . . . .	35 00
BARRY, ROBERT, . . . . .	25 00
BUNSTREAD, FREEMAN J., . . . . .	25 00
BULKLEY, LUCIUS D., . . . . .	25 00
BURKE, JOHN, . . . . .	25 00
BELDEN, E. B., . . . . .	20 00
BEARD, GEORGE M., . . . . .	15 00
BLAKE, JOHN ELLIS, . . . . .	10 00
BRYANT, JOSEPH D., . . . . .	10 00
BRANDIS, ADOLPH, . . . . .	10 00
BILLINGTON, C. E., . . . . .	10 00
CRANE, JOHN J., . . . . .	250 00
CLARK, ALONZO, . . . . .	100 00
CHALMERS, THOMAS C., . . . . .	50 00
CHESMAN, T. MATLACK, . . . . .	25 00
CYBERT, JOHN R., . . . . .	25 00
CARR, SILLIAM, . . . . .	20 00
CHAUVEAU, JEAN P., . . . . .	15 00
CHAMBERLAIN, WM. M., . . . . .	10 00
CHURCH, ALLEN S., . . . . .	10 00

*Dedication of the Library Hall.*

11

CISNEROS, JEAN, . . . . .	\$10 00
CUSHMAN, WM. F., . . . . .	10 00
DRAPER, WILLIAM H., . . . . .	50 00
DALTON, JOHN C., . . . . .	25 00
DENNIS, FREDERICK S., . . . . .	25 00
DA COSTA, J. M. (Phila.), . . . . .	25 00
DERBY, RICHARD H., . . . . .	10 00
DURANT, GHISLANI, . . . . .	5 00
EMMET, THOMAS A., . . . . .	25 00
ELBERG, LOUIS, . . . . .	25 00
ELIOT, ELLSWORTH, . . . . .	25 00
FLINT, AUSTIN, . . . . .	75 00
FARNHAM, HORACE P., . . . . .	35 00
FRANKEL, EDWARD, . . . . .	10 00
FULLER, ROBERT M., . . . . .	10 00
FOSTER, JOEL, . . . . .	10 00
FARRINGTON, JOSEPH O., . . . . .	5 00
GRISWOLD, HENRY, . . . . .	50 00
GARRIGUES, HENRY J., . . . . .	10 00
GILLETTE, WALTER R., . . . . .	10 00
GOULEY, JOHN W. S., . . . . .	10 00
HARTLEY, MRS. F. W., . . . . .	200 00
HINTON, JOHN H., . . . . .	125 00
HUBBARD, SAMUEL T., . . . . .	75 00
HOLCOMBE, WM. F., . . . . .	50 00
HANKS, HORACE T., . . . . .	25 00
HADDEN, ALEXANDER, . . . . .	25 00
HERRICK, EVERETT, . . . . .	25 00
HAMILTON, FRANK H., . . . . .	20 00
HUDSON, E. DARWIN, JR., . . . . .	10 00
HOGAN, MICHAEL, . . . . .	10 00
HOGAN, EDWARD J., . . . . .	10 00
HARRISON, GEORGE T., . . . . .	10 00
HERZOG, MAX, . . . . .	10 00
HUNTER, ALEXANDER S., . . . . .	5 00
JACOBI, ABRAM, . . . . .	60 00
JANVIN, JOSEPH E., . . . . .	30 00
JANEWAY, EDWARD G., . . . . .	25 00

JOHNSON, LAURENCE, . . . . .	\$15 00
JENKINS, J. FOSTER, . . . . .	10 00
JONES, WILLIAM W., . . . . .	10 00
JUDSON, A. B., . . . . .	10 00
KNIGHT, JAMES, . . . . .	100 00
KATZENBACH, W. H., . . . . .	10 00
KELLOGG, THEODORE H., . . . . .	10 00
LEAMING, JAMES R., . . . . .	80 00
LUSK, WILLIAM T. . . . .	50 00
LAWRENCE, JONATHAN S., . . . . .	25 00
LEE, CHARLES C., . . . . .	20 00
LEALE, CHARLES A., . . . . .	10 00
LORDLEY, J. E. M., . . . . .	10 00
LYNCH, P. J., . . . . .	10 00
LOCKROW, ARTHUR V. B., . . . . .	5 00
METCALFE, JOHN T., . . . . .	200 00
MERRILL, JOHN N., . . . . .	25 00
MILHAU JOHN J., . . . . .	20 00
MANN, MATTHEW D., . . . . .	10 00
MACGREGOR, JAMES R., . . . . .	5 00
MONELL, JOSEPH A., . . . . .	5 00
NICHOLS, ELIAS S., . . . . .	25 00
NOEGGERATH, EMIL, . . . . .	25 00
NOTES, HENRY D., . . . . .	20 00
NEFTEL, WM. B., . . . . .	10 00
NEWCOMB, GILBERT L., . . . . .	5 00
OTIS, FESSENDEN N., . . . . .	100 00
PURPLE, SAMUEL S., . . . . .	125 00
PARKER, WILLARD, . . . . .	50 00
PIFFARD, HENRY G., . . . . .	50 00
POLK, WM. M., . . . . .	25 00
PINCNEY, HOWARD, . . . . .	10 00
PACKARD, CHARLES W., . . . . .	10 00
PURDY, SAMUEL A., . . . . .	5 00
PETERS, JOHN C., . . . . .	5 00
REINELANDER, MISS JULIA, . . . . .	100 00
ROBINSON, BEVERLY, . . . . .	10 00

# *Dedication of the Library Hall.*

13

RAMSDELL, EDWIN D., . . . . .	\$5 00
ROHIE, JOHN W., . . . . .	5 00
SAYRE, LEWIS A., . . . . .	100 00
SMITH, A. A., . . . . .	50 00
SEGUIN, E. C., . . . . .	25 00
SMITH, J. LEWIS, . . . . .	10 00
SMITH, ANDREW H., . . . . .	10 00
STIMSON, DANIEL M., . . . . .	10 00
SHAFFER, NEWTON M., . . . . .	10 00
SHERADY, JOHN, . . . . .	5 00
THOMAS, T. GAILLARD, . . . . .	100 00
TAYLOR, JAMES R., . . . . .	25 00
TAYLOR, CHAS. F., . . . . .	25 00
THOMSON, WILLIAM H., . . . . .	25 00
TAUSZKY, RUDOLPH, . . . . .	5 00
VAN BUREN, WILLIAM H., . . . . .	25 00
WOOD, JAMES R., . . . . .	150 00
WRIGHT, CHARLES, . . . . .	65 00
WIENER, JOSEPH, . . . . .	60 00
WHITE, WILLIAM T., . . . . .	35 00
WHITE, JOHN P. P., . . . . .	25 00
WOOD, CHARLES S., . . . . .	25 00
WEBER, LEONARD, . . . . .	20 00
WEISSE, FANEUIL D. . . . .	20 00
WHITE, FRANCIS V., . . . . .	15 00
WELCH, WILLIAM H., . . . . .	10 00
WINSTON, GUSTAVUS S., . . . . .	10 00
WYLIE, W. GILL, . . . . .	10 00
WEBSTER, DAVID, . . . . .	5 00
WOOLLEY, J. V. S., . . . . .	5 00
YALE, LEROY M., . . . . .	10 00

Respectfully submitted,

JOSEPH WIENER, M.D., *Chairman.*  
HENRY G. PIFFARD, M.D.,  
WM. T. WHITE, M.D.,  
JOHN H. HINTON, M.D.

On the conclusion of the reading of the foregoing report, the President called for a report from the Building Committee, and on introducing the Chairman of the same, ex-President Dr. Samuel S. Purple, he spoke as follows :

MR. PRESIDENT :—I am instructed by the Board of Trustees of this Academy to present to you and the Fellows this evening the Report of the Building Committee.

It will doubtless be remembered, sir, by those who were present at the stated meeting of the Academy held on the 16th of January last, that it was then announced by me that a very worthy member of the medical profession was desirous of giving to this Academy five thousand dollars toward the expense of erecting this hall, substantially upon the plans prepared by the accomplished architect, Mr. William Bloodgood, in 1876, for the Committee on Ways and Means, who, at that time, had charge of the matter of raising funds and the purchase of the main building. The conditions and gift were accepted by the Academy, and, at its stated meeting held on the 20th of February following, the matter of raising the requisite funds by subscriptions, together with the plans for the construction of the building, were referred to your Board of Trustees with power. This Board, on the 22d of the same month, appointed a Building Committee to take full charge of the matter. The committee, after holding several meetings and considering proposed amendments, approved the plans and specifications which have guided them in the construction of this hall. Three thousand dollars having been raised, and this amount, together with the gift of five thousand dollars, having been paid into the treasury of the Board, the contract, which was for eight thousand dollars, was signed by the President and Recording Secretary of the Academy and the builder, Mr. Freeman Bloodgood, on the 19th day of April last, and on the 22d ground was broken. The contract called for the completion of the hall by the middle of August.

From the time ground was broken until the 23d of June the work progressed in the most satisfactory and workman-like



manner. On that day Dr. Abram Du Bois, our generous benefactor, signified to the Chairman of the Building Committee his desire to give the Academy three thousand dollars more (making in all eight thousand dollars) on condition that the Academy would place this amount in the permanent library fund already initiated. The Academy having adjourned for the summer, subject to the call of the President, and he being absent in Europe, the proposition was submitted to the Council at its regular meeting held on the 24th of June, and this body unanimously accepted the additional gift in the name of the Academy, and requested the Board of Trustees to place to the credit of the permanent library fund three thousand dollars out of the moneys paid into the treasury of the Board—which recommendation has been complied with. Your committee continued to press the work forward to completion as rapidly as care and proper skill (for which the name of the builder is proverbial) would permit.

During the progress of construction it became evident to your committee that additional improvements, not called for in the specifications accompanying the contract, were essential to the security, ventilation, and proper convenience of the building. These having been duly canvassed, were adopted and carried into effect. They comprise the alterations in the entrance to this hall, the construction of new ceilings, painting, gas-fitting, fixtures for the accommodation of the library, ventilation, seating, carpeting for this audience room, and sundry repairs to the main building.

The debit and credit account for all this may be summarized as follows:

Receipts, \$12,500.37.

Disbursements, \$12,500.37, which includes \$3,000 placed to the credit of the permanent library fund.

These results afford your committee the pleasure of announcing to you, Sir, and to the Fellows of the Academy, that the entire cost of the improvements here presented to you this evening have been provided for, and that no debt has been created.

The committee, in approaching the conclusion of their labors, desire to acknowledge their obligations:

1st. To the Academy's most worthy benefactor, Dr. Abram Du Bois, for his noble and generous gift.

2d. To the Fellows and friends of the Academy for their generous subscriptions.

3d. To the Committee on Subscriptions for their zealous and untiring efforts in obtaining subscriptions, and in particular to the Chairman of that committee, Dr. Joseph Wiener, for his earnest, indefatigable, and self-sacrificing labor in behalf of the Academy's interests. To the builder, and supervising architect, Mr. Freeman Bloodgood and Son, for their untiring zeal and obliging courtesy in carrying into effect the plans of the Committee. And also to Messrs. Silliman & Farnsworth, architects, whose counsel having been sought, freely gave their aid in solving the all-important question of ventilation.

And, finally, Mr. President and Fellows of the Academy, your Board of Trustees, with a desire to acknowledge to all men a full appreciation of the generous acts of a noble benefactor, have placed a tablet upon these walls declaring, in letters of gold, that

THIS HALL,  
the GIFT of  
ABRAM DU BOIS M.D.,  
A  
GENEROUS BENEFACITOR  
OF THE  
NEW YORK ACADEMY OF MEDICINE,  
WAS ERECTED  
A.D. 1879.

All of which is respectfully submitted.

SAMUEL S. PURPLE, M.D., *Chairman*,  
SAMUEL T. HUBBARD, M.D.,  
GOUVR. M. SMITH, M.D.



The President then addressed the Academy as follows :

*FELLOWS OF THE ACADEMY OF MEDICINE :*

Reports of committees, and especially the reports of Subscription and Building Committees, do not generally constitute a particularly interesting part of the proceedings of an occasion like that which has now brought us together. They seldom stimulate the imagination, excite the emotions, quicken the impulse, or rouse to new efforts. They are usually regarded as mere formalities, and are listened to with indifference, as a part of the programme which must be politely endured.

But unless I greatly err, the reports to which you have listened cannot thus be characterized. I cannot but feel that they have been heard by every true friend of our profession, by every loyal heart who sincerely believes in its high mission, and by all who desire to see its members maintain that high standard of excellence, ability, and erudition, proportionate to the present magnitude and future growth of this city, with an interest quite apart from the mere catalogue of names and a summary of details. In these reports, there is a significance, a depth of meaning, a dawning of the future, which to thoughtful minds must be more suggestive, more stimulating to honest work, more comprehensive in its influence upon the young of our number who are hereafter to carry out what is now only begun, and more effective in its perpetuity of influence than any fascination of oratory or graces of rhetoric could secure. There is an eloquence of results more moving and more abiding than can be expressed by words.

While I think the results as shown by these reports may be regarded as on the whole satisfactory, yet I must honestly confess that there are omissions and defects in them which it is my duty to supply on the present occasion.

First, as regards the Subscription Committee. I must say that I do not aim "to gild refined gold" by avowing my belief that every one who has been solicited will confirm my assertion that the Chairman and his colleagues have performed

the thankless duties assigned to them with untiring zeal, constant faithfulness, and pertinacious courtesy.

Nor do I seek "to paint the lily" when I refer to the Chairman of the Building Committee, who began his functions by creating the necessity for a Library Hall, by his magnificent donation of what, in some respects, constitutes an unique library, which at the present day could not, in its completeness, be procured by a money purchase, and who with his colleague on the committee have devoted many hours of every day during the past months, when many of us have sought the rest and the recreation of a summer vacation, or have only aided by watching the progress of the work with indifferent curiosity, to the performance of their duties. We owe to their incessant watchfulness and their laborious faithfulness, the fact that we are now so promptly in possession of the fruits of the noble munificence of one, and the liberal contributions of many to give "a local habitation" to the combined and organized work of the medical profession, in the cultivation of the science of medicine, the advancement of the character and honor of the profession, the elevation of the standard of medical education, and the promotion of the public health.

It is a pleasure, no less than a duty, to publicly express an appreciation of the faithfulness to agreement, the promptness in performance, and the thoroughness in detail on the part of the excellent contractor and builder, whose part of the work has never once, so far as I have heard, been the subject of complaint or censure by the Building Committee, who have exercised a watchful supervision over its daily progress.

We have now met to dedicate this Library Hall to the high purpose for which many have labored earnestly, and many have contributed to the full extent of their hard-earned means, but which would not have been accomplished at the present time had not one noble benefactor come forward with a truly munificent donation, and crowned with success the effort to secure for the meetings of the Academy—and other medical societies which are working for the same end—a well-lighted



and well-ventilated hall, and a home for the accumulation of all the literature of our profession. Regretting that the æsthetic effect is marred by the necessity of allowing the white walls to dry and harden before they can receive an appropriate coloring, we hope that you will be satisfied that all engaged have done as well as circumstances would permit, bearing in mind the cardinal principle which has governed all action—that nothing should be done which would involve debt.

May we not hope, with confidence, that the meeting of this evening will begin a new era in the history of the New York Academy, and that these rooms will be a central home, in which the profession will find it pleasant and profitable to work together for mutual and public improvement, for the advancement of science, for the promulgation of new truths and the development of progressive skill in our art; and may I not add, the cultivation of those social graces which bind us in the friendly ties of the common brotherhood of a useful and an honorable profession? Shall we not make this Library Hall the Mecca to which the profession from all parts of the country will desire to make a pilgrimage, feeling well assured that they will be welcomed to a library which contains the accumulated treasures of the literature of the past on every topic pertaining to medical science, and the current and periodical literature of the present day so necessary for all who would keep abreast with the rapid advance of science.

The founders of this Academy, many of whose portraits have been loaned to decorate our walls for this evening, “builted better than they knew.” On a former occasion it was my privilege to show how great has been its influence in stimulating work in the form of contributions to medical literature, and I surprised many by the assertion, which cannot be controverted, that a physician whose library consists exclusively of all the works by Fellows of this Academy, has a better and a more useful working library than belonged to a large majority of the profession in this country when the Academy was founded.

The future rank which the profession of this city will hold,

—or, to give expression to the same idea in a different form—the future character of the Academy of Medicine, is in the hands of the young men who are soon to fill our places. If time would permit, I could give conclusive demonstration that we have every reason to anticipate that our successors, as regards numbers, acquirements, abilities, mental activity, high ambition, and useful creditable work, will far surpass their predecessors. With the great increase in the numbers competing, it will require superior culture, greater talent, and more persevering industry for individuals to attain equal prominence with some of their predecessors; but this is not a misfortune, but a blessing to the profession, and will prove a boon to the Academy. Young men, we who soon are to give place to you, salute you.

It is but a few years since a young man and unknown assistant-surgeon in the army, began to develop such ability and genius, such an instinct for seizing opportunities, such a capacity for creating circumstances, such a power of compelling everybody to work for the ends which he sought to attain, and such a breadth of scope in his great schemes, that there has resulted as the fruit of his work one of the most remarkable medical libraries now in existence. But he has not stopped with this work. His bibliographical labors have been immense, and are of incalculable value to the medical scholarship of the whole country. In addition, he has planned and supervised the construction of a hospital which, when completed, in the opinion of those competent to judge, will surpass in excellence all others in the world as regards its fitness and adaptation to the purpose for which it is designed. Nor can I omit some reference to the great work which he has done in connection with the organization and efficiency of the National Board of Health, through the agency of which we may confidently hope that in the future we may be spared those terrible epidemics which have brought such terrible distress and sorrow in some parts of our land. I refer to what this gentleman has done, not for the purpose of paying a personal compliment, but to emphasize an illustration and enforce the moral, that if



the genius, ability, and energy of one man can accomplish so much—stimulating, swaying, and educating the whole medical mind of the country—what ought the combined talents, learning, and labor of such an organization as the New York Academy of Medicine, to accomplish in the future? Shall we not do as much for the elevation and advancement of the profession through the efficient work of the young men who are coming up as has been done by one Billings? Remembering what he has done, we can forgive him if, in former days, he has been instrumental in drawing away a large number of most valuable works to glorify a library in the political metropolis of the country, which ought to have been retained in the commercial and intellectual metropolis of the country and should now be on the shelves which surround us. I beg pardon of our Boston friends who now honor us by their presence, but when I speak of New York as the intellectual metropolis I refer to quantity and not to quality.

We may congratulate ourselves on our success in so far filling the shelves of our library. But as yet we have hardly begun. I know of many precious treasures in the form of valuable libraries that are destined in the future to find their home here. The families of those who have been Fellows will learn to know the importance of the mission of the Academy, and will inherit an interest in its prosperity; and we shall thus have the efficient assistance of womanhood to cheer us on. Already we have had the evidence of this feeling transmitted to a daughter of one of the original founders of the Academy. The name of Samuel Pomeroy White, formerly Professor of Surgery in the Berkshire Medical College, will always have a place in surgical literature as that of the young surgeon in the country who first successfully tied the internal iliac artery. The name of Mrs. Marcellus Hartley, his daughter, will always have a place in the annals of the New York Academy of Medicine as one who honored the memory of her father by her generous and unsolicited contributions to its aid on three different occasions.

As the purpose and aims of the Academy become known

to the community at large ; as the good work that it is expected to accomplish becomes more and more apparent, and as the rich and cultured class of this great city grow to appreciate the importance of, and necessity for, a medical profession of the highest order as regards talent, acquirements, and devotion to their calling, and as they gradually learn that all this that we are doing is not for the purpose of putting money into our own pockets, but that it is only accomplished by taking money out of our pockets—may we not confidently hope that some of the wealthy will have the sagacity to perceive that by aiding us they become public benefactors? May we not anticipate that some Johns Hopkins will give us the means to secure a home worthy of the profession of such a city, like the imposing and noble edifices now belonging respectively to the Royal College of Physicians and the Royal College of Surgeons of London? But before we can expect such a result, we must first demonstrate our worthiness and prove our competency to hold such a trust. Although our financial position is now good, inasmuch as our income more than pays our expenses and the interest on the mortgage of \$10,000, our only liability, yet the existence of a debt always justly creates distrust.

If, therefore, some of our number who possess abundant means, whether acquired by inheritance or through the professional success due to great talent, untiring industry, wise prudence, and judicious investments, should determine to relieve the Academy of all odium of debt, the shock of the announcement that this mortgage had been lifted would be borne by us all with manly courage.

A few months since a monument was erected in the town of Danville, Kentucky, in honor of McDowell, the surgeon who first successfully performed the operation of ovariectomy, which now must be conceded to be the greatest surgical achievement of the present century. It was a tribute due from the profession to one of its great men. The operation is now accepted as one of the valuable additions to our means of saving many loved lives. It has been successfully performed in this country in many hundreds of cases by Atlee, Kimball, Dunlap, Peaslee,



Thomas, and others. Many of us can remember when it was denounced by the most prominent men in the profession, both at home and abroad, as an operation so hopeless and desperate as to seem unjustifiable, even in the face of surely impending death from ovarian disease. Yet, within a recent period, one of our own number—need I mention the name of T. Gaillard Thomas?—has performed the operation in twenty-two cases, with but a single death.

The great work of our lamented Peaslee was dedicated to the memory of Ephraim McDowell, the father of ovariectomy, and to Thomas Spencer Wells, the greatest of ovariectomists.

The latter has performed the operation 958 times, and, according to the calculation of Lord Selborne, late Lord High Chancellor of England, made in 1875, and based on five hundred operations, he must now have added to the life of women in Great Britain, but little short of 20,000 years of health, usefulness, and happiness. His previous valuable contributions to general surgery have been comparatively forgotten in the great fame he has acquired as an ovariectomist. How it has happened that one whose name is one of the chief glories of England as a benefactor to humanity, has not ere this received the highest honor which government ever bestows upon medical men, would be a mystery to us on this side of the Atlantic, did we not recall the fact that it has long been the custom of courts and governments to confer the highest honors on those who are most successful in destroying life on a large scale, and not to those who save life, and to those who are the most adroit as politicians, in securing the success of their party, and not to those of the highest statesmanship.

Feeling strongly, as I do, that it is a wise and good thing for the profession to cherish a warm admiration for those of our number who make positive contributions to our literature and to science, and who really accomplish great results, I beg to present to the Academy a marble bust of Mr. Spencer Wells. It was on exhibition at the last exposition of the Royal Academy of London, and received high encomiums from the critics of the artistic journals. In the number of the *British Medical*

*Journal*, for May 3, 1879, in an editorial on the Royal Academy, referring to this bust of Mr. Spencer Wells, it says this "will certainly strike every one who examines it as a work remarkable for its artistic feeling and great realistic power. It is in the strongest sense characteristic, and indeed is so powerful and remarkable a likeness as at once to challenge attention by its individuality and impressive resemblance. If any fault is to be found, it is, perhaps, that it is wanting in the look of genial amiability which distinguishes the great surgeon whom it reproduces, and modifies the otherwise stern forcible features, which are here depicted with great power." While making no pretension as an art critic, I may be permitted to say it gives the expression which he wears when making a diagnosis. It must greatly add to the interest with which it is examined when I add that it is the work of one of our profession, the artist being the eminent ophthalmologist Richard Liebreich, who, in addition to the laurels which he has earned in ophthalmology, in science and in medical literature, must now be added those of a success in sculpture, which hardly any amateur has ever obtained, and most professionals might envy." In connection with this I loan for the occasion a photograph of the beautiful home of Mr. Wells, a few miles from London, with an inscription by one of our most popular authors.

I also beg the Academy to accept a presidential chair and table, with a reading-desk and table for the Secretary. In parliamentary language, the chair is symbolic of the governing power which gives expression to such rules of order as are intended to assist the assembly in accomplishing the work for which it has come together in the best possible manner. I doubt not that it will always be worthily filled by those who will bring to the service of the Academy zeal, enthusiasm, wisdom, and dignity.

There is an old Greek proverb attributed to Hesiod, that "Half is better than the whole," which often has occurred to me as a wise one to be remembered by those who read papers before learned societies. The number of speakers who are to follow, whom I know you are impatient to hear, renders this



proverb peculiarly pertinent for me to recall on the present occasion. I will therefore conclude my remarks, by expressing the hope that the New York Academy of Medicine will ever regard this as a memorable era in its history, and will this evening take a new departure which will be followed by a glorious career of usefulness and influence that will, in all future time, remain a monumental tribute to the high purpose, wise forethought, and noble liberality of Abram Du Bois.

We are honored by the presence of one of the Corresponding Fellows of the Academy from England, whose life has been conspicuous in its devotion to the elevation of the profession in his efforts to secure a higher standard of medical education as a requisite for admission into our ranks.

I have the pleasure of introducing Dr. Henry W. Acland, Regius Professor of Medicine in the University of Oxford, President of the British General Medical Council.

DR. HENRY W. ACLAND spoke as follows :

*Mr. President, Fellows of the Academy and Gentlemen:*

I acknowledge, very heartily and very sincerely, the courtesy which I find to be universal, but never more strikingly and kindly than has been shown to me to-night, in at once requesting a stranger to commence some of the business which follows immediately upon the President's address. I am well aware of the great kindness which is shown to what is sometimes called the mother country, in asking me to speak first, and the only objection I have to making some remarks at this time is that it is not quite just that the senior member of the University of Oxford present should not have begun this part of the exercises—Dr. Gross, of Philadelphia, the great American surgeon. I feel that Dr. Gross should have been honored with the position which I now occupy.

In the first place I must remark, as has been done already by the President, that both of the reports to which we have listened are full of interest. His own address is full of matter, of various kinds, for reflection, and the occasion is one,

I venture the thought, of more than usual importance. I must make some excuse for hazarding that remark, and the excuse, I think you will agree with me, is a just one. This is the second visit I have paid to the States. My first was made twenty years ago, when I took occasion to see a large portion of your country, but only points of special importance, from Chicago on the North to the city hall of Richmond on the South. It was my sincere endeavor to use every opportunity of seeing the great medical institutions of the new world and the collateral institutions which, indirectly or directly, either must be preventive or curative asylums that fell in my way, and I was astonished by what I saw upon that occasion. I will say that it has been my avocation to lecture upon hospitals, especially upon their construction, and at no time has a recital been absent of what I had seen of American hospitals.

But after twenty years I have come again, and I have seen what progress you are making, and what the results have been after meeting a convulsion—I believe the greatest civil convulsion which ever took place in any nation. I read the reports of your great struggle, found daily in the papers, and, knowing many of the localities which were then trembling beneath the tread of powerful armies, you may well imagine that I read them with very great interest; and now what do I find to be one of the astonishing results of the activity of the American people since they have passed from under that calamity? As I look about me, wonder is excited that cities, magnificent cities, have grown up so quickly, and it is a matter of astonishment as well as food for serious reflection and criticism. I have only to refer to what I have seen in your own city—great then, but greater now—in illustration of my meaning. Not many days ago I had the opportunity to visit the New York Hospital. I find that it has quite a curious construction. Nothing has been spared, it seems—I do not say it is the best possible advance—but nothing of taste, skill, art, comfort, or luxury, has been spared to make the building what it is. And I asked myself the question: Why not all this for the sick poor? If a man has a great wealth



cannot he say, I will care for the sick poor? The institutions upon the island, supported by the city or by public charity, are all well and good in their place; but why should not those who have great wealth, those who are able to live in great luxury, give of their means for those who come after them, who in future generations suffer in broken-down health and by sickness? It is a question of how the rich and great shall provide for the poor and feeble.

But to come back to the present occasion. If I understand it aright, the object of your meeting is to dedicate your new library hall, and to promote the growth of your library. Upon that subject I do not know that I have anything special to say. Not that I have no interest in these works, but because one of the most learned librarians in the world is present.

There are, however, one or two things which I should like to say, as the result of my observation for the last few days and weeks. When we look at the great work which Dr. Billings is doing, and has done, and what Dr. Gross has given to the profession in surgery, and what is going on around us daily, giving evidence of progress and enthusiasm, must it not move us also to some enthusiasm when we consider what the next generation will do with all the means at their command which this generation has provided for them. A great and vast work is being carried on by the medical profession in the United States. But I wish to make this remark, that the difficulty of producing adequate combination among the numerous institutions is a great obstacle to ridding you from undesirable associations. I am not indisposed to think that in the future it will not be difficult in the United States to make a common understanding among the honorable members of the profession, so that they shall not be dominated by those who are not entitled to the confidence of the public. Medicine is a subject not for statesmen or for politicians, but a subject for humanity, and the progress of medicine concerns the entire world and all people wherever sickness and suffering exist.

With the institutions of politics we have nothing to do in my country, but we are making the attempt to get a record

of all those who have a good medical education, so that with those we may have to do, and nothing at all with all the others.

There is another subject which is extremely interesting, both in a political and in a medical sense, and that is your formation of a National Board of Health. But it has been a matter of surprise to me, that it has been a question as to how far a central authority is entitled to issue advice over your dominions. We have no such difficulty upon the other side; why can there be such a difficulty upon this side? It seems to us incredible that such a difficulty should exist. Assuredly it is progress for us *all* through a central board. We recognize that the hindrance of disease is one of our great duties, the matter is sure to progress, we are certainly to be benefited, and the public will be grateful for our labors as soon as they are appreciated.

It is impossible for a stranger to come here, or to read the ordinary literature of the day, without being struck with one feature, almost peculiar to the New World, that many of those who have amassed fortunes have had the wisdom during their lifetime to so turn their great wealth by leaving good work behind, instead of mere cash to their successors. You have numerous libraries, well endowed, which all the people may consult; you have numerous publications of the highest order, and on the subject in which I feel a deep, personal interest. There has lately been published here the best manual upon public hygiene I have seen; and what you now want is a professorship in this great work in which all questions relating to State medicine, public hygiene, hospitals, and all kindred topics can be referred to for study, for lecture, and for expression of opinion. There are one or two such men, at least, already working in this field, but you should have a professorship created expressly for such upon the vast subject of comparative national health. God grant that one of your wealthy citizens may, in his good wisdom, found a professorship in Comparative National Health, so that his representative may commence at once the work of statistics, correlating the



vast amount of knowledge which has already been accumulated.

In the name of my countrymen, I thank Dr. Barker for the honor he has done to my friend, Mr. Spencer Wells, and the Academy, for the singularly pleasant illustration which it has given, by the meeting, of the unanimity of result which may be obtained by those who contribute of their wealth, and those who prosecute their profession in the saving of human life. And, I may add, that there is no one who has a more honorable and deserving fame among us than the great American surgeon, Dr. Gross, who figures in the lists of great names in old Oxford.

The President then read a telegram, received from Mr. Geo. W. Callender, announcing his inability to be present, on account of sickness.

He then introduced the Senior Graduate of Oxford University, and Honorary Fellow of the Academy. "I can assure the Academy," he said, "that he is a delightful and gay deceiver, for he sent me a telegram, saying that it would be utterly impossible for him to be present, but I now have great pleasure in introducing Professor Gross, of Philadelphia."

#### REMARKS BY PROF. GROSS.

"Pity the sorrows of the poor old man." I did not suppose that your President would take such unfeeling advantage of me upon this occasion, belonging as he does to what promises to be a great liberal institution.

I congratulate you Fellows of the Academy, with all my heart, on the progress which you have made, and I wish it were in my power to add to the accumulation, that I might give you money, but unfortunately I am nothing but a poor physician and a poor surgeon, in that respect sharing the honor with most of those whom I address. I recall with melancholy feelings the name of one of the founders of the Academy, Dr. John Watson, and it is a great source of regret

to me that his library was not placed in the Academy. The object in recalling his name is simply to call the attention of the Fellows of the Academy to the fact that the writings of the fathers of the profession are too much neglected at the present day. Who of us know much of the writings of Hippocrates, Celsus, Ambrose Paré, Richard Wiseman, Cullen, Gooch, or the classical Pott or John Hunter, and many others? I make these remarks with the view to calling attention to the fact that there are but few of us who are not ignorant of the writings of the fathers of the profession. I am quite sure that the time is not far distant when great pains will be taken, either to present in the form of abstracts, or the original works containing the writings of the fathers of the profession to the rising generation. There are many useful kernels locked up in the writings of these men. There is much to be found in their works and advice to the profession of the greatest possible value.

I did not come here, Mr. President and Fellows, with the view of making an address, but for the purpose of mingling with the Fellows of the Academy and shaking hands with you, and greeting some of my old friends, and, above all, to shake hands with my illustrious British cousin.

[Hand-shaking with Dr. Acland and applause.]

The President then introduced Dr. John S. Billings, of the United States Army, Washington, D. C., Librarian of the Surgeon-General's Office.

#### REMARKS BY DR. BILLINGS.

*Mr. President:* I feel that I must congratulate you upon two things:

*First.* I congratulate you upon the evidence of progress which I see about me and the proceedings of this evening have shown.

*Secondly.* I congratulate you and those who are assembled here upon the fact that I am not going to inflict an address or speech upon this audience. I have simply to report briefly to the Academy with reference to the other library known as the Na-



tional Medical Library, of which I have charge. When I say, "the other library," I speak the words of truth, because the present existence of the library in Washington is, I do not doubt, dependent upon the exertions of members of this Academy, acting as a body in making reports at times when the appropriations for the Washington collection were in great danger of being entirely cut off, and of the work that had been commenced going to complete ruin. There is little danger now, however, that it will happen; still it is necessary that the profession should keep an eye to the work going on in the medical department of the government, and see that it does not fail for want of proper criticism and means to stimulate its growth. Your other library now contains about 50,000 volumes, rather more than the same number of pamphlets, about 70,000 volumes in all, and perhaps 100,000 titles for cataloguing. It is probably the best practical medical collection in the world, and that is due to the completeness of its folios of journals and periodicals.

The value of a library depends very much upon the nature of its catalogue. We have been at work for a few years past on an index catalogue, and it has received an immense amount of labor. There was a time when it depended upon a single person, but the work has been so systematized that its progress now depends upon no one man; it will go of itself. It gives both the names of the authors and the subjects, and there are probably about 8,000 subjects in the classification. It now seems probable that the first volume will be published some time in next June or July.

There is another publication which has been commenced, and that is what is known as the *Index Medicus*. This is simply a monthly statement of the daily work of the library in Washington, and in looking over the subscription list to this monthly publication I find some very interesting facts. On the list I find that 33 copies are sent to Great Britain, 19 to Germany, 5 to Japan, 1 to France, and in this country 1 goes to Georgia, 1 to Maine, 1 to Mississippi, 1 to Missouri, 3 to New Jersey, and only 169 to New York City.

It is desirable in each city of this kind, where several different collections of medical books exist, that there should be a complete collection, at least of all the journals and transactions of different medical bodies. This catalogue will be a catalogue of this library, of the library of the New York Hospital, of the library of the Medical Journal Association,\* and each one of you, residents of New York, may like to know where those journals are, and by a joint effort this catalogue can be printed, when you will be able to know exactly where they are.

THE PRESIDENT.—I am debarred from introducing the speakers who are to follow, in such terms as you would feel to be their due, and my own feelings would prompt me to use, because they belong to us, and a becoming modesty forbids it. But I have great pleasure in next introducing our senior ex-President, Dr. Willard Parker.

DR. PARKER remarked—

*Mr. President and Fellows of the New York Academy of Medicine:*

I do, this evening, most heartily congratulate you on the position that this Academy now holds, and the progress that it has made since its first inception—it has now become a centre, and is known, not only in this country but abroad, for the stand it has taken in all matters connected with medical science—and especially do I congratulate you upon the completion of this beautiful hall which we are met here to-night to dedicate.

As one of the oldest members present, it may not be amiss for me to give a few personal reminiscences of the history and early struggles of this Academy.

When I first came to New York, now more than forty years ago, the city had 300,000 inhabitants, and con-

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\* Nor

edicine.



tained one hospital, one eye infirmary, one medical college, and but three dispensaries.

The profession was divided into cliques, each jealous of all others, and openly expressing these feelings of jealousy and unkindness. The County Medical Society was the only organized association of the kind, and this was so paralyzed by want of harmony among its members, that its existence had become merely a matter of form, it having been kept alive simply by the holding, as prescribed by law, of its annual meeting for the election of officers.

At this time the late Dr. Edward Delafield, always a most loyal member of the profession and an earnest worker in all matters tending to its welfare, having studied the working of a similar organization in London, and become convinced of its practical usefulness, succeeded, on the ground of humanity and common interest, in uniting many of these inharmonious elements, by founding the "Society for the Relief of the Widows and Orphans of Medical Men." This society has already accomplished an almost incalculable amount of good, and to-day holds a permanent fund of about \$130,000, the income of which is devoted to the support of its beneficiaries.

On the adjournment of the Society after its fourth annual dinner, held the 18th day of November, 1846, at Peteler's, a then well-known restaurant, a few of us lingered, and in discussing the condition of the profession in our city, reference was made to the influence exerted on the legal profession by the Bar Association of a neighboring State, and it was suggested that the medical profession form a similar association in New York. The meeting organized by calling Dr. Alexander H. Stevens to the chair, and it was resolved to invite the profession to hold a general meeting at the Hall of the Lyceum of Natural History, on the 12th of December following. Previous to this meeting there was some caucussing among the leading members of the profession as to the best course to pursue.

ally a call was issued by a committee composed of Dr. Alexander H. Stevens, as representing the College of Physicians and Surgeons; Dr. Valentine Mott, as representing the

Medical Department of the University of the City of New York; and Dr. Isaac Wood, as representing the profession at large. A committee of fourteen was appointed to submit a plan of organization, and draw up a constitution and by-laws. An adjournment was then made until the 6th day of January, 1847, when this committee was to submit its report for action.

The attendance at the meeting of the 6th of January was large, and the late Dr. John Stearns (to whom we are indebted largely for the introduction of the use of ergot, and who had had considerable experience in legislative bodies) was called to the chair. After some preliminary discussion, it was moved that those present willing to join such an association should enroll their names, and some 250 physicians at once signed.

This report suggested that the Association be called The New York Academy of Medicine, and stated as its objects—

1. The cultivation of the science of medicine.
2. The advancement of the character and honor of the profession.
3. The elevation of the standard of medical education.
4. The promotion of the public health.

The report was accepted and adopted, and an election of officers held. A small hall in Wooster Street, over a coal yard, was secured as a place of meeting, and here we continued to meet until June, 1850, when we moved to the smaller hall of the New York University. Later on, our meetings were held in the lower lecture-room of the College of Physicians and Surgeons. It soon became evident that there were many heterogeneous elements among us. Several of our members were *great* in debate; others were *strong* on "parliamentary usage," and were constantly raising points of order; so that many of our earlier meetings were wholly taken up in discussions having nothing to do with science. Early in our history it was resolved to raise a building fund, and as far back as the date of our incorporation, June 23, 1851, subscriptions were solicited. The amount realized by subsequent efforts in obtaining subscriptions was finally such as to warrant us in the purchase of a building in 1875. In 1877 our charter was amended so as to permit



us to hold bequests, as well as real estate. In 1875 the present building was purchased and fitted up so as to adapt it to our wants. Still, however, with our enlarging library and increasing need of room, we were somewhat cramped, and it was resolved to raise funds to build a hall covering the rest of our ground. This hall, thanks to the generous gift of an honored member of our profession, is now completed, and we meet this evening formally to dedicate it.

Again, Mr. President, let me congratulate you upon the position that the Academy now holds, and the influence it exerts in questions of scientific and popular interest. Heretofore, politicians have controlled matters of sanitary legislation. Now they must yield to science, and an organization such as ours can, by its influence, prevent charlatans and political tricksters from committing fraud on the pretext of sanitary reform.

In closing, as expressive of our sentiments on this occasion, I would beg leave to offer to you, Mr. President and Fellows of the Academy, the following resolution :

*Resolved*, That the opening of the new Library Hall is a demonstration of the wisdom and zeal of the founders of the New York Academy of Medicine in their efforts for the cultivation of the science of Medicine, for the advancement of the character and honor of the profession, for the elevation of the standard of medical education, and for the promotion of the public health.

THE PRESIDENT.—I have now the pleasure of introducing another ex-President, of whom it is needless to say more, Dr. Austin Flint.

DR. AUSTIN FLINT'S REMARKS.

*Mr. President :*

It is announced in the programme that I am to second the motion to adopt the resolution just read. I do this most heartily. It is also announced that I am to make some remarks. As my name is the last on the programme, I find myself the barrier intervening between the psychical feast which we have enjoyed and the physical enjoyment which, thanks to the hospitality of the President, awaits us. Under these cir-

cumstances, I forbear to take out of my pocket a manuscript of several closely written quires, embodying thoughts and sentiments appropriate to this occasion! I console myself with the reflection that this elaborately prepared paper may be read at some future meeting of the Academy, or of the County Medical Society, and given to the public through the columns of one of our medical journals. Those of my brethren who are aware of my proclivity to speech-making, can, perhaps, in a measure, appreciate the self-denial which I am exercising at this moment in not availing myself of this opportunity to make an extemporaneous discourse of an hour or so in length.

But, Mr. President, I will say that there are several reasons for our being joyful to-night. We should rejoice that the Academy has a permanent *home*; that this home has been enlarged and made beautiful by one whose beneficence does honor to our institution, to our profession, and to himself. It is a matter for rejoicing that this beneficence comes from a member of our profession. But let me say that, as a Fellow of the Academy, I will not refuse a vote for the acceptance of a gift of any sum from a hundred dollars to a million, although the giver be not a member of the medical profession. We have great reason to rejoice in the presence of our distinguished guests, Acland, Gross, Shattuck, and others. We may, finally, rejoice in the present as an earnest of the future prosperity and usefulness of the Academy.

The President then put the question on the resolution as moved and seconded, and the same was unanimously and enthusiastically adopted.

THE PRESIDENT.—Boston “notions” have become famous the world over, and we in New York are always glad to get them and make use of them. Among our honored guests on the present occasion is a distinguished member of our profession from that city, and I now have great pleasure in introducing Dr. George C. Shattuck, late Professor of the Theory and Practice of Medicine in the Medical Department of Harvard University.



DR. SHATTUCK then arose and said :

I thank you very much, Mr. President, for your kind notice and invitation to be present on this interesting occasion. I am also glad to recognize the wise benefaction of my friend, Dr. Du Bois, in forwarding the construction of so commodious and useful a building as this in which we are assembled. Though a native and resident of a city which was formerly known as the mountain, I must recognize that New York may be said to be a city set on a hill ; for the good works done here are known everywhere, and an example is set worthy of imitation in smaller and less conspicuous places. Ours is a learned profession, and to get together a good library, and bestow the books so as to be accessible, and under such pleasant surroundings, is an achievement to be proud of. And among your guests I recognize a "chiel" who not only takes notes, but takes books also ; and the great medical library in Washington, which he has gathered with such pains and assiduity, may be said to be in a good degree the result of visits to New York, and thus to bear witness to the literary and scientific interest and activity of the profession in this great metropolis. We in Boston are reported to have a sufficiently good opinion of ourselves, but as I am prompted to tell of a medical building of our own and of a library and hall smaller, but in its sanitary arrangements reminding me of this, there occurs to me an account of what happened to a solid man of Boston, who journeyed as far as Chicago. He was a regular visitor to an insurance office at home, where he met other solid men, and indulged occasionally in congratulations and thanksgivings on being allowed to be born in Boston, and in the great privilege of living in a city so well and universally known as sometimes even to be designated as the hub of the universe. And when this citizen returned from his journey and repaired to his haunts, his friends recognized something in his air and manner betokening that he had heard and seen something making a profound impression, and they immediately catechized him. "Ah," he replied, "indeed I have something to tell you, at which



you, too, will be astonished. I was at an office like this, in Chicago, and kindly received, and they asked me where I resided, I promptly replied to the one who addressed to me the question, that I was indeed a citizen of no mean city, for I lived in Boston. 'How do you call the place?' was the next question, and when I repeated Boston, he exclaimed that that was a place he had never heard of; and then he asked one and another of those present if any of them had heard of such a place, but all said no; and, finally, one said it seemed to him that there was a small village, on the coast of New England, with such a name." And then we in Boston tried to secure a visit from your English guest, so well known for his successful labors in behalf of the profession, and we offered to show him, in the land of women's rights, a model prison for women; we offered to put him through a slaughter-house and an insane asylum of the most approved construction, but there were more attractions here, and he would stay and come to this meeting. So I cannot boastingly refer to our little village, and our small State, even when tempted to it by recognizing that two, at least, of the former Presidents of this Academy, and others of your distinguished members, were born and nurtured in what is sometimes spoken of as the land of cod-fish and potatoes. I can only again express my thanks for the privilege of being here and promise you on my return to tell of how much this Academy is doing to make the profession respected and honored, that we may be stimulated to activity and zeal in such important matters; and that we may profit by the example so clearly and pleasantly set forth in this evening's doings and sayings.

On the conclusion of the very pleasing remarks of Dr. Shattuck, the President extended an invitation to all present to go below to the supper room and partake of the "loving-cup." He expressed a regret that the loving-cup was one of only glass instead of such material as is generally made use of in England on similar occasions.

On motion, the Academy then adjourned.

## APPENDIX.

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### Report of the Trustees for 1879.

The Trustees of the New York Academy of Medicine beg leave to present their Annual Report for the financial year ending November 22, 1879.

The Board was organized for the year at the stated meeting, held January 4, 1879, by the election of AUSTIN FLINT, M.D., Chairman, and Samuel S. PURPLE, M.D., Secretary, and is composed of the following members :

AUSTIN FLINT, M.D.....	Term ends, 1880.
SAMUEL T. HUBBARD, M.D.....	" 1881.
ISAAC E. TAYLOR, M.D.....	" 1882.
GOVERNEUR M. SMITH, M.D.....	" 1883.
SAMUEL S. PURPLE, M.D.....	" 1884.

During the year, ten stated meetings, one adjourned, and one special meeting, have been held. At the stated meeting held in February, the duties imposed upon the Board by the by-laws of the Academy, regarding resident fellows in arrears of annual dues, were discharged.

The Academy, at its stated meeting held on the 20th of February last, having accepted the conditions of a gift of five thousand dollars from a most worthy benefactor, Dr. Abram Du Bois, referred the whole matter of the erection of a library hall, and the improvements of the main building, to the Board of Trustees, with power. This Board, on the 22d of the same month, appointed a Building Committee, consisting of Dr. Samuel S. Purple, Chairman, Dr. G. M. Smith, and Dr. S. T. Hubbard, to take full charge of the matter. On the 19th of April, 1879, the requisite amount (eight thousand dollars) for the construction has been paid into the treasury of the Freeman Bloodgood, builder, was



consummated two days after, which called for the erection and completion, by the middle of August following, of the new library hall, at a cost of eight thousand dollars, in accordance with the plans and specifications which had been approved by the Committee.

On the 23d of June following, Dr. Abram Du Bois signified to the Chairman of the Building Committee his desire to give three thousand dollars more to the Academy, on condition that the same sum be placed in the Permanent Library Fund. This condition was unanimously accepted, in behalf of the Academy by the Council at its stated regular meeting, held on the 24th of June, 1879, and the Board of Trustees was requested to place to the credit of the Permanent Library Fund three thousand dollars, out of moneys paid into the treasury. This request your Board has complied with.

The work was duly completed according to the conditions of the contract. The expense of the erection and furnishing of the new library hall, together with the improvements, and furnishing of the main building, has been met by contributions received from a most worthy benefactor—the appropriation made from the treasury—and the liberal subscriptions of many Fellows and friends of the Academy, as will be seen in the reports of the treasurers hereunto annexed. Your Board of Trustees are now able to report that the entire cost has been paid, and consequently no debt has been created.

The Board of Trustees has performed the duty imposed upon it by Section 3 of Chapter 12 of the By-laws, and on the 20th of November examined the accounts and vouchers of the Treasurer of the Board, and found the same correct. The full report of the Treasurer is herewith submitted, marked (A). A summary of the same is as follows. We find in—

1st, General Permanent Fund.....	\$737 00
2d, Library Fund.....	3,750 38
3d, Fund for Liquidation of Mortgage.....	895 69
4th, Special Fund for New Library Hall, Improve- ments, etc.....	12,500 37
Disbursements.....	12,500 3

The general fund, made up from incidental receipts from rents to medical societies, etc., which have been, by order of the Board, deposited in the Second National Bank of the City of New York, is as follows:

Balance received from Dr. J. R. Leaming, late Treasurer of the Board of Trustees, January 10, 1879..	\$325 63
Received to November 20, 1879.....	909 40
Total.....	\$1,235 03
Disbursements.....	941 76
Balance on deposit in Second National Bank,	\$293 27

Your Board of Trustees, believing that the security of the Academy, as well as its best interests, would thereby be subserved, appointed, at its last stated meeting, a committee composed of two of their number, to make out an inventory and appraisement of the property of the Academy. The report of that committee is herewith submitted, and is as follows:

NEW YORK, *November 20th*, 1879.

The committee appointed to make an inventory, and appraise the property of the New York Academy of Medicine, respectfully report they find:

	VALUE.
1 house and lot, with library hall as an extension....	\$51,750 00
1 iron safe, for records, etc.....	75 00
Furniture, carpets, chairs, tables, etc.....	2,200 00
Library fixtures, and library of 10,000 volumes.....	20,000 00
11 oil paintings and portraits.....	3,300 00
30 engravings and portraits, framed.....	100 00
3 glass mirrors in front parlor.....	600 00
1 marble and 12 plaster busts.....	1,000 00
350 volumes of Transactions, bound and unbound.. }	1,200 00
150 volumes of Bulletin, bound and unbound..... }	
Crockery, silverware, spoons, knives, etc.....	200 00
Total.....	\$81,430 00

All of which is respectfully submitted.

SAMUEL T. HUBBARD, M.D.,  
SAMUEL S. PURPLE, M.D.,

*Committee.*



In view of the fact of the large increase in the library, and of the personal property of the Academy, your Board of Trustees have felt it a duty to place a greater amount of insurance on the same, and have accordingly directed their Treasurer (Dr. Charles Wright) to obtain an amount sufficient to make the sum total twenty-five thousand dollars.

The Board beg leave to call the attention of the Academy to the desirability of a change in the termination of the financial year of the institution to as near the close of the month of December as possible. This would facilitate the making up of the accounts of the Treasurer, and particularly those connected with interest-bearing funds.

They have also to call attention to the fact that a vacancy in the membership of the Board will take place at the end of the year, by the expiration of the time of service of Austin Flint, M.D., and that the amended charter of June 2, 1877, calls for the election of one trustee to fill the vacancy thus caused.

Finally, your Board of Trustees congratulates the Council and the Academy on the marked evidence of a growing confidence reposed in the Institution in all of its departments, and on the evidence which is continually arising of increasing faith in its future stability and usefulness.

All of which is most respectfully submitted by order of the Board.

AUSTIN FLINT, M.D.,  
*Chairman.*

SAMUEL S. PURPLE, M.D.,  
*Secretary.*

**Report of Treasurer of Board of Trustees..**

NOVEMBER 20, 1879.

*To the Trustees of the New York Academy of Medicine :*

In conformity with the provisions of the By-Laws of the Academy, I have the honor to render herewith my report. The accounts of the funds in my hands have been kept separately as to each fund entrusted to me, as follows :

*1. General Permanent Fund.*

Cash on hand, January 10, 1879, from the following donors :

Dr. Samuel S. Purple.....	\$100 00	
Dr. Ellsworth Eliot.....	100 00	
Interest.....	6 00	
	<hr/>	\$206 00
Interest accrued on that date.....		19 18
Received, March 4th, from the estate of Dr. E. R. Peaslee (bequest).....		500 00
Interest accrued to July 1, 1879.....		11 87
		<hr/>
		<b>\$737 00</b>

*2. Library Fund.*

Cash on hand, March 4, 1879, from the following donors :

G. P. Haws, Esq.....	\$100 00	
Dr. T. M. Cheesman.....	10 00	
Dr. S. S. Purple (for E. R. P.).....	375 00	
Dr. J. R. Leaming....	5 00	
Interest.....	7 50	
	<hr/>	\$497 50
Received, March 14th, from Dr. S. S. Purple (for E. R. P.).....		237 50
Received, Aug. 13th, from fund for extension, etc.		3,000 00
Interest accrued to July 1, 1879.....		15 38
		<hr/>
		<b>\$3,750 38</b>

*3. Fund for Liquidation of Mortgage.*

Cash on hand, January 10, 1879, from the following donors:

H. B. Loomis, Esq.....	\$100 00	
Dr. Wm. Detmold.....	500 00	
		\$600 00
Received, Sept. 17th, from Dr. John G. Adams....	150 00	
Received, October 17th, from Dr. J. W. S. Gouley.	100 00	
Interest accrued to July 1, 1879 *.....	45 69	
		<u>\$895 69</u>

*4. General Fund.*

Cash on hand, January 10, 1879.....	\$325 63	
Received from Medical Societies, etc.....	909 40	
		\$1,235 03
Expenditures, as per accompanying statement marked A.....		<u>941 76</u>
Balance on hand.....		<u>\$293 27</u>

*5. Special Fund for Alteration and Improvement of Academy.*

Total amount of subscriptions and interest received, \$12,500 37

Expenditures, as per accompanying statement  
marked B..... 12,500 37

Total amount on hand..... \$5,676 34

You will please notice that no expenditures have occurred under funds 1, 2, and 3.

Respectfully submitted,

CHARLES WRIGHT, M.D.,  
*Treasurer.*

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\* Since this report was presented to the Academy, Dr. W. H. Jackson has contributed \$300 to this fund—making the total amount \$1,095.69.



*Dedication of the Library Hall.*

45

*Statement A.*

To Lock & Munroe.....	\$4 80	
" M. McMullen.....	3 00	
" J. Cornelisse.....	7 95	
" J. Cornelisse.....	1 50	
" Jefferson Fire Insurance Co.....	10 63	
" Niagara Fire Insurance Co.....	10 63	
" Farragut Fire Insurance Co.....	21 25	
Interest on mortgage, \$10,000, to April 14, 1879...	300 00	
To Niagara Fire Insurance Co. (builders' risk)....	10 00	
" Jefferson Fire Insurance Co. (builders' risk)....	10 00	
" Farragut Fire Insurance Co. (builders' risk)....	8 50	
" Croton Water Tax for 1879.....	15 00	
" John H. Morrill (storage).....	30 50	
" Wm. De Vries (Janitor).....	9 15	
" Alex. Gaw (painting).....	198 85	
Interest on mortgage to October 14, 1879 .....	300 00	
		<u>\$941 76</u>

*Statement B.*

To Freeman Bloodgood (as per contract).....	\$8,000 00	
" John Grayhurst (carpets).....	102 78	
" Freeman Bloodgood (extra work).....	350 00	
" A. G. Newman (hardware).....	50 28	
" Freeman Bloodgood (extra work).....	678 08	
" W. & J. Sloane (carpets).....	63 87	
" A. Opperman (chairs).....	180 00	
" Library Fund.....	3,000 00	
" Carpets and chairs for front basement of Academy.....	75 86	
		<u>\$12,500 87</u>

NEW YORK, November 20, 1879.

We have this day examined the accounts and vouchers of the Treasurer of the Trustees, and find the same correct.

SAMUEL S. PURPLE, M.D.,  
S. T. HUBBARD, M.D.,  
*Auditing Committee.*

### Report of the Treasurer of the New York Academy of Medicine for 1879.

The Treasurer's Annual Report for 1878 showed a balance in  
the treasury of..... \$209 03

The receipts for the fiscal year have been as follows :

From annual dues of Fellows.....	\$3,015 00	
“ initiation fees, 27 new members.....	135 00	
“ sales of Academy's publications.....	20 55	
		<hr/> 3,170 55

Making, with last year's balance, total credit of..... \$3,379 58

The disbursements for the year for the usual current expenses  
of the Academy, viz. : salaries, journals, binding, printing,  
engrossing, framing resolutions, coal, gas, repairs, labels,  
stamps, collector's commissions, expenses of moving, fix-  
tures for library, seating for new hall, etc., amount to..... 3,037 55

Leaving a balance in treasury, October 13th, of..... \$342 03

With no unpaid bills in Treasurer's hands.

The arrears for annual dues amount to \$1,110, which is an improve-  
ment of about \$500 on the last year's report.

Respectfully submitted,

H. P. FARNHAM, M.D., *Treasurer.*

The Treasurer's account has the following report of the  
Auditing Committee :

NEW YORK, October 13, 1879.

The undersigned have this day examined the accounts and vouchers  
of the Treasurer and found them correct, leaving a balance in the trea-  
sury of three hundred and forty-two dollars and three cents.

\$342.03

MARK BLUMENTHAL, M.D.,

E. DARWIN HUDSON, JR., M.D.,

*Auditing Committee.*

**Report of the Committee on Library for 1879.**

The Committee on Library begs leave to make to the Council and the New York Academy of Medicine their fourth Annual Report.

The Committee consists of the following named members :

DR. E. DARWIN HUDSON, JR., Chairman, whose term ends 1880.			
DR. GEORGE BAYLES.....	"	"	1881.
DR. LAWRENCE JOHNSON.....	"	"	1882.
DR. JOSEPH WIENER, Secretary.....	"	"	1883.
DR. JOHN H. HINTON.....	"	"	1884.

The Committee has held fourteen meetings, at eight of which it was favored with the counsel of Dr. S. S. Purple, who has been untiring in his interest in the library.

Dr. Lawrence Johnson, Librarian, has served faithfully and acceptably as librarian during the year. Dr. Robert Campbell, Assistant Librarian, is still in service in the library; his monthly bills for services rendered have been audited and recommended to be paid, at the rate of \$500 per annum.

At the beginning of the year the Academy appropriated \$375 for the general uses of the library, and later in the year, when it was determined to enlarge the Academy building, \$100 more, to be used in moving the books, pictures, and property in the care of the Committee. Of the above-named amounts (\$475) there were bills for journals, bindings, moving books, and miscellaneous articles, audited and recommended to be paid, to the amount of about \$270. The remaining \$205 have been expended in putting up book-shelves in the main building and in the new library hall.

The care of the library and the valuable portraits during the enlargement of the building was a matter of great moment and anxiety to your Committee; several thousand volumes had to be put in large packing-boxes and stored in the parlor of the main building, and all the portraits had to be stored in a room on the third floor. The Committee is happy to state that the books, portraits, and busts have all been cared for and placed



in their new locations without injury, except to the binding of one volume, which had to be taken to the bindery for repairs.

The following were the donors to the library for the year, with the number of contributions of each:

NAMES OF DONORS.	Volumes bound.	Volumes unbound.	Pamphlets.	Medical Journals.
Dr. John G. Adams, New York.....	24	2	291	....
" E. S. F. Arnold, Newport, R. I. ....	60	....	....	....
" Fordyce Barker, New York.....	148	1	....	3
" George Bayles, " .....	....	....	....	3
" George M. Beard, " .....	....	....	2	....
" C. W. Bernacki, " .....	....	....	....	1259
" J. Ellis Blake, " .....	2	15	4	792
" N. Bozeman, " .....	....	....	1	....
" A. H. Buck, " .....	....	....	1	....
" L. D. Bulkley, " .....	....	2	3	97
" S. C. Busey, Washington, D. C. ....	....	....	2	....
" R. Caizergues, Montpelier, France..	....	1	....	....
" R. Campbell, New York.....	....	2	5	....
" F. A. Castle, " .....	....	....	....	654
" D. Cerna, Philadelphia, Pa. ....	....	....	2	....
" J. J. Chisholm, Baltimore, Md. ....	....	....	1	....
Mr. Thomas L. Clacher, New York....	1	....	....	....
Col. Emmons Clark, " .....	....	1	....	....
Dr. J. W. Corson, Orange, N. J. ....	1	....	....	....
" H. E. Crampton, New York .....	1	....	....	....
" J. H. Douglas, New York.....	150	....	....	21
" H. S. Downs (the late), New York (by bequest).....	397	18	....	466
" Abram Du Bois, New York.....	468	54	14	....
" Ellsworth Eliot, " .....	5	1	12	1
" J. H. Emerson, " .....	....	....	19	....
" H. M. Field, Newtown, Mass. ....	....	....	1	....
" J. P. Rego, Filho, Rio Janeiro, Brazil.	....	....	1	....
" Dr. Austin Flint, New York.....	2	....	....	....
" E. P. Fowler, New York.....	1	....	2	....
" S. W. Francis, Newport, R. I. ....	....	2	....	....
" D. H. Goodwillie, New York.....	....	....	1	....
" S. D. Gross, Philadelphia, Pa. ....	1	....	....	....
" A. McL. Hamilton, New York.....	....	....	1	....
" S. T. Hubbard, New York.....	3	....	....	....
" E. D. Hudson, Jr., " .....	....	....	....	9
" A. Jacobi, " .....	....	....	4	....
" L. Johnson, " .....	3	3	....	....
" A. B. Judson, " .....	10	....	....	....
" G. W. H. Kemper, Muncie, Ind. ....	....	....	1	....
" E. Kershner, U.S.N. ....	1	....	....	....
Mr. John J. Knox, Washington, D. C. .	....	1	....	....

NAMES OF DONORS.	Volumes bound.	Volumes unbound.	Pamphlets.	Medical Journals.
Dr. J. R. Leaming, New York.....	5	....	1	....
" E. Lent, Cologne, Germany.....	....	....	....	21
" J. B. Lindsley, Nashville, Tenn....	1	....	....	....
" B. Loewenberg, Paris, France. ....	....	1	....	....
" E. R. Mayer, Wilkesbarre, Pa.....	....	....	1	....
Mr. J. D. Mullins, Birmingham, Eng...	....	1	....	....
Dr. P. F. Mundé, New York.....	....	....	7	900
" W. K. Newton, ".....	7	....	16	....
" R. J. O'Sullivan, ".....	....	....	1	....
" F. N. Otis, ".....	....	....	....	394
" E. H. Pensles, ".....	1	....	....	....
" J. C. Peters, ".....	106	104	209	458
" H. G. Piffard, ".....	45	9	66	645
" S. S. Purple, ".....	7	2	3	....
" F. Rizzoli, Bologna, Italy.....	1	2	....	....
" H. B. Sands, New York.....	....	....	1	....
" E. H. M. Sell, ".....	....	....	....	188
" S. Sexton, ".....	2	....	3	158
" N. M. Shaffer, ".....	1	....	....	....
" A. H. Smith, ".....	....	....	2	....
" H. Lyle Smith, Hudson, N. Y.....	1	....	....	....
" Stephen Smith, New York.....	55	....	....	....
" F. G. Snelling (family of the late) New York.....	5	....	....	145
" E. R. Squibb, Brooklyn, N. Y.....	....	....	1	....
" A. Russell Strachan, New York....	34	13	9	31
" Octavius Sturgis, London, Eng....	1	....	....	....
" R. Tauszky, New York.....	....	....	....	1
" Charles F. Taylor, New York.....	....	....	1	....
" Isaac E. Taylor, ".....	1	1	....	....
" Robert W. Taylor, ".....	....	....	....	42
" W. H. Van Buren, ".....	....	....	....	229
Mr. L. Waldo, ".....	1	....	....	....
Dr. Robert F. Weir, ".....	....	....	....	35
" W. T. White, ".....	1	....	....	....
" J. Wiener, ".....	12	18	....	10
" G. Wilkes (family of the late), N. Y.	434	21	54	178
Mr. Isaac F. Wood, New York.....	....	....	1	....
Dr. Thos. F. Wood, of Wilmington, N.C.	....	1	....	....
" John A. Wyeth, New York.....	1	....	....	....
" Leroy M. Yale, ".....	11	....	8	7
Messrs. D. Appleton & Co., New York.	54	....	....	....
" W. Wood & Co., New York....	39	257	....	18
American Geographical Society.....	....	....	7	....
" Medical Association.....	1	....	....	....
" News Company.....	....	....	3	....
Commissioner of Agriculture, Washing- ton.....	....	1	....	....
Governors of the New York Hospital..	....	....	1	....

NAMES OF DONORS.	Volumes bound.	Volumes unbound.	Pamphlets.	Medical Journals.
Managers of Hudson River State Hospital.....	.....	.....	1	.....
Massachusetts State Board of Health.....	.....	1	.....	.....
Medical Society of North Carolina.....	.....	1	.....	.....
Medical Society of County of New York.....	.....	.....	11	.....
Medical Union Library Club of N. Y.....	.....	4	.....	1
New York Association for Improving the Condition of the Poor.....	.....	.....	5	.....
New York Dermatological Society.....	20	75	.....	5
" Medico-Legal Society.....	.....	.....	1	.....
" Pathological Society.....	1	.....	.....	.....
" Society for the Relief of the Ruptured and Crippled.....	.....	.....	1	.....
Royal Medical and Chaururgical Society, London.....	1	.....	7	.....
Secretary of the Navy, Washington.....	.....	1	.....	.....
State Board of Health of Wisconsin.....	1	.....	.....	.....
Surgeon-General, U. S. A.....	1	.....	.....	.....
Trustees of the Boston City Hospital.....	1	.....	.....	.....
" " N. Y. Academy of Med.....	35	.....	.....	.....
Total.....	2155	624	798	4511

In addition to the above, the following donations:

From Dr. John G. Adams:

An engraved portrait, framed, of Brerauina.

" " " Dr. J. W. Francis.  
 " " " Dr. J. D. Graham.  
 " " " Dr. E. Miller.  
 " " " Spurzheim.

A lithograph portrait of Dupuytren, and one of Dr. P. S. Pithouck, and sixteen other engravings. Also a plaster bust of Dupuytren; an autograph letter from Dr. Valentine Mott, commencement of the Brown Stone Medical School (framed), and a parchment of plants collected by Dr. Adams himself in the vicinity of Paris in 1835.

From Dr. J. S. F. Knapp, of New York, N. Y., a list of nine diseases published by the New Spicilian Society.

Dr. Knapp's list, of New York, a native list of Dr. J. Spenser Wells, the author's collection, together with a portrait.

Dr. V. Knapp, of New York, an autograph letter from Sir George Cooper.

The late Dr. H. S. Downs, of New York (by bequest), certificates of membership in various medical societies, a volume of manuscript notes, statistics of births occurring in his practice, a box of anatomical specimens, and the diploma and certificates of his father, Dr. James Downs.

Dr. Geo. H. Fox, of New York, six parts of his atlas on skin diseases.

Dr. John P. Gray, of Utica, N. Y., ten micro-photographs.

Dr. H. T. Hanks, of New York, the examination papers of the College of Physicians and Surgeons, New York, for September, 1879.

Dr. P. F. Mundé, of New York, five engravings.

Dr. J. C. Peters, of New York, forty-five maps relating to cholera.

Dr. H. G. Piffard, of New York, one book size rule.

Mr. F. W. Stevens, of New York, a portrait in oil of Dr. Alex. H. Stevens.

Dr. Oliver White (deceased), of New York, an oil painting, entitled the "Birth of Bacchus."

From the family of the late Dr. Wilkes, of New York, two mahogany book-cases, six photographs of skin diseases, one photograph of Dr. Swett, and Dr. Wilkes's certificate of membership in the New York Academy of Medicine.

Dr. T. F. Wood, of Wilmington, N. C., two facsimile letters from Jenner, the discoverer of vaccination, and one from Thomas Jefferson, when President of the United States.

Arnold, Constable & Co., six packing boxes.

From the Medical Union Library Club, of New York, a manuscript copy of their by-laws.

New York Dermatological Society, one plaster cast and eleven photographs of diseases of the skin.

The following publications have been received as exchanges regularly during the year :

Bulletin of the Academy of Medicine, Paris.

Bulletin of the National Board of Health, Washington.

Edinburgh Medical Journal.

Hospital Gazette.

La Lancette Belge.

Louisville Medical News.

North Carolina Medical Journal.

Official Gazette of the United States Patent Office, Washington.

Physician and Pharmacist.

Proceedings of the Medical Society of the County of Kings.

The Sanitarian.

One number each of the following has been received :

Library Journal.      Public Health.      *Révue Médicale Roumaine.*



The writer would say, in passing, that in contrast to the above long and valuable list of accessions to the library for 1879, that in the year 1865, when he was Librarian, there were for that year just twenty-seven items received: seventeen volumes (some of which were reports of the Sanitary Commission) and ten numbers of medical journals, mostly from abroad. Our library was then stored by two of the members of the Academy. When we now look around us and above us at our goodly heritage, we may truly and thankfully say that the mustard seed, which our good and wise fathers planted in 1847, has taken root, and that we do find lodgment in the branches of the tree thereof.

The following journals have been subscribed for by the Academy during the year :

- Braithwaite's Retrospect (Amer. reprint).
- British Medical Journal.
- Dublin Journal of Medical Science.
- The Lancet.
- London Medical Record.
- Medical Times and Gazette.
- Obstetrical Journal of Great Britain and Ireland (with American Supplement).
- Practitioner.
- Gazette des hôpitaux.
- Gazette hebdomadaire.
- Gazette médicale de Paris.
- L'Union médicale.
- Lyon médical.
- Archiv für path. Anat. und Physiol. und für klinische Med.
- Berliner klinische Wochenschrift.
- Jahresbericht über die Leistung. und Fortschr. Gesam. Med.
- Schmidt's Jahrbücher.
- American Journal of Insanity.
- American Journal of Medical Sciences.
- American Journal of Obstetrics.
- American Journal of Pharmacy.
- American Medical Bi-Weekly.
- American Practitioner.
- Atlanta Medical and Surgical Journal.
- Boston Medical and Surgical Journal.

Buffalo Medical and Surgical Journal.  
Canada Lancet.  
Chicago Medical Journal and Examiner.  
Cincinnati Lancet and Clinic.  
Detroit Lancet.  
Index Medicus.  
Maryland Medical Journal.  
Medical News and Library.  
Medical Record.  
Monthly Abstract.  
Nashville Journal of Medicine and Surgery.  
New Orleans Medical and Surgical Journal.  
New Remedies.  
New York Medical Journal.  
Pacific Medical and Surgical Journal.  
Philadelphia Medical and Surgical Reporter.  
Philadelphia Medical Times.  
Richmond and Louisville Medical Journal.  
St. Louis Medical and Surgical Journal.  
Virginia Medical Monthly.

In addition to the above the committee recommend the Council that the following named journals be taken for the year 1880 :

*French Journals.*

Annales des maladies de l'oreille.  
Annales d'hygiène publique.  
Annales de gynécologie.  
Annales d'oculistique.  
Annales de dermatologie.  
Archives générales de médecine.  
Archives de physiologie.  
Bulletin gén. de thérapeutique.  
Bulletin de la Société d'anatomie de Paris.  
Bulletin et mémoires de la Société de Chirurgie.  
Journal de médecine de Bruxelles.  
Journal de l'anatomie.  
La France médicale.  
Le mouvement médical.  
Le progrès médical.  
Recueil d'ophtalmologie.  
Revue des sciences médicales en France et à l'étranger.  
Revue mensuelle de médecine et de chirurgie.

*German Journals.*

Allgemeine wiener medizinische Zeitung.  
 Archiv für Augenheilkunde.  
 Archiv für Ohrenheilkunde.  
 Archiv für Anatomie, Physiol. und wissen. Med.  
 Archiv für experimentelle Pathologie und Pharmacologie.  
 Centralblatt für Augenheilkunde.  
 Centralblatt für Chirurgie.  
 Centralblatt für Gynäkologie.  
 Centralblatt für die med. Wissenschaften.  
 Centralzeitung für Kinderheilkunde.  
 Deutsche Archiv für klin. Medicin.  
 Deutsche med. Wochenschrift.  
 Deutsche Zeitschrift für Chirurgie.  
 Jahrbuch für Kinderheilkunde.  
 Jahrbuch medizinische (Stricker).  
 Klinische Monats. für Augenheilkunde.  
 Monatsschrift für Ohrenheilkunde.  
 Monatsblätter für Augenheilkunde.  
 Vierteljahrschrift für Dermatologie u. Syphilis.  
 Vierteljahrschrift für prakt. Heilkunde.  
 Wiener Klinik.  
 Wiener med. Presse.  
 Wiener med. Wochenschrift.

*Russian Journal.*

St. Petersburger med. Wochenschrift.

*Italian Journals.*

Annali di Ottalmologia.  
 Giornale italiano delle malattie venere e della pelle.  
 Lo Sperimentale.  
 Gazzetta medica italiano lombardia.  
 Revista clinica di Bologna.

*Spanish Journals.*

La Cronica médica.  
 La Cronica oftalmologica.  
 O Progreso medico (Rio de Janeiro).

*Cuban Journal.*

Cronica Medico-Quirurgica de la Habana.

*English Journals.*

Journal of Anatomy and Physiology.  
Journal of Mental Science.  
Medical Press and Circular.  
Quarterly Journal of Microscopical Science.  
Brain.  
Glasgow Medical Journal.

*American Journals.*

American Journal of Otology.  
Archives of Dermatology.  
Archives of Ophthalmology and Otology.  
Buffalo Medical and Surgical Journal.  
Chicago Journal of Mental and Nervous Diseases.  
Journal of Physiology.  
Medical Bulletin (Philadelphia).  
Medical Herald (Louisville).  
Michigan Medical News.  
St. Louis Clinical Record.  
St. Louis Courier of Medicine.

With those that are already subscribed for, and those that are recommended, there will be :

German.....	27
French.....	25
English.....	13
Spanish.....	3
Italian.....	5
Cuban.....	1
American.....	49
Russian.....	1
Total.....	122

It is estimated that we now have about ten thousand volumes (10,000) in our library. This fact, associated with the hope that the Academy may favorably consider and recommend the proposition to subscribe for the 122 journals men-

tioned above, have determined the Committee to recommend that there be a circulating department of the library, and also a journal department, and that the library be kept open till 9 o'clock P.M. To carry on this very vital and much-needed change and scope in the management and usefulness of the library, additional rooms and funds will be required. Members have already asked for a more quiet reading-room, freed from the necessary movement and noise of a public room. To meet this want the Committee asks that the third story of the Academy building be placed at their disposal. The Committee also ask that an additional assistant librarian be accorded.

The following are the estimates of the Committee for expenses of the library for the coming year: \*

For Journals.....	\$500 00
“ Binding.....	150 00
“ Two Library Assistants.....	800 00
“ Case for Card Catalogue.....	50 00
“ Hospital Reports and Transactions of Societies..	50 00
“ Miscellaneous Expenses—Printing, Stationery...	100 00
	<hr/>
	\$1,650 00

The very important feature of cataloguing has been seriously encroached upon by the necessary displacement and boxing of a part of the books. It is now, however, going on, and there are over 3,000 volumes catalogued.

E. DARWIN HUDSON, JR., M.D.,  
*Chairman.*

JOHN H. HINTON, M.D.,  
*Secretary.*

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\* Since this report was made to the Council, the Academy, on its recommendation, has not only granted the appropriation asked for by the Committee, but also an additional amount, which will be used in increasing the literary facilities of this department of the institution.





"LOVING-CUP" PRESENTED BY MRS. JOHN JACOB ASTOR.







Illustration of the vase of the poet, as described in the text.

**Presentation of the "Loving-Cup."**

At the Stated Meeting of the Academy, held January 15, 1880, and after the close of the usual scientific business, the very interesting proceedings of the presentation of a "Loving-Cup" occurred.

THE PRESIDENT.—It will be remembered that on the opening of this Library Hall, when the programme of the evening had concluded, all present were invited to go below and partake of the "loving-cup." A regret was expressed that the loving-cup, of itself, was only glass, instead of such material as is generally made use of, in such ceremonials, in England. Soon after the report of the meeting was published in our city newspapers, it will also be remembered that the Academy received, through its President, a letter containing a check for \$200 for its library, from a lady whose earnestness in every good word and work, and whose interest in and sympathy with all the benevolent labors of our profession is universally known and acknowledged in this city. It is not merely for the sake of saving my voice, but also for the purpose of doing better justice in its reading, that I now ask Dr. Thomas to read this letter, which I have just received for the Academy.

DR. THOMAS then read the following letter:

DEAR DR. BARKER:—I beg your acceptance, as President of the New York Academy of Medicine, of the accompanying cup, which, if you will oblige me by using as a "*Loving-Cup*" on the occasion of your next anniversary meeting, will owe all of its grace to words spoken by yourself in the early Autumn. It comes to you as a messenger of a true sympathy in the purposes of the Society, and it is engraved with words that, I believe, touch equally your *ideals* for its work and your *personal* feelings toward all of your associates; and I shall feel a sincere gratification if its occasional use—in agreement with such kindly sentiments—may procure a moment's pleasure to those whose days hold, necessarily, so large a measure of care and sacrifice.

Always, my dear Doctor, with faithful regard,

Your friend,

AUGUSTA ASTOR.

THE PRESIDENT.—The cup, to which reference is made in the letter just read by Dr. Thomas, I now shall bring before you. Its beauty of design, conceived by the donor of the gift, and its perfection of artistic finish, are worthy of the graceful language in which it is presented to us. I am most happy to offer it for your inspection. Its surface is ornamented by the acacia, symbol of friendship and love. On the front is the seal of the Academy, its motto, and the head of Hippocrates. Above, is the name of the President and the date of his election, with spaces left for the names of his successors; while on its upper part is engraved a motto in which I am sure that all of us will most heartily sympathize. When we adjourn, I shall ask you all to make use of this “loving-cup” in the room below. It has already been consecrated by the lips of woman, the aroma of which, let us hope, will ever remain to perpetuate the beautiful sentiment engraved upon it: “May peace and love be multiplied unto us.”

DR. LEWIS A. SAYRE.—Mr. President: It seems to me that this is an unusual occasion, and that it deserves more than ordinary attention. I think we should not let this presentation pass without proper recognition. When I look back to my first visit to New York, there seems to be such a contrast between the feeling of the people toward the medical profession at that time, and that exhibited by the evidence shown to us to-night by this token of respect, that it is little less than marvellous. I recall very well, coming, as I did in 1839, from Kentucky, asking some half a dozen men—respectable-looking men of New York—where the Medical College was, and none of them could tell where it was, and sent me down to Barclay Street, not knowing that it had been removed to Crosby Street some three years. That was pretty much all the interest they felt in those days in the study of medicine. My old friend here to the left, from Boston, was just saying to me that in Boston it was customary for wealthy persons to give to colleges, to institutions, to endow professorships, and to all villages for the people to interest  
 behalf, and that they directed their

attention to it ; but in New York the great commercial interests attract so much attention that the profession of medicine is lost sight of. Generous the people are in their distributions to hospitals, all of which is very well, but this is the first instance where a person, just from a hint that our loving-cup was not stronger than glass, has entered and supplied the want, and I regard it as an indication that the wealthy citizens of New York are becoming interested in our profession. I look upon it as an era, as an opening up to the hearts of the wealthy citizens of this great emporium, and I believe that all we have to do is to make our wants known to the wealthy and cultivated people of this city, and we can command what we wish. I beg leave to offer the following resolutions :

*Whereas*, Mrs. John Jacob Astor has kindly presented to the New York Academy of Medicine this magnificent "Loving-cup," as an evidence of love and respect for the profession, and of her regard for the President of the Academy ; therefore,

*Be it resolved*, That the New York Academy of Medicine tender to the donor an unanimous vote of thanks for her generous gift, which will be preserved by its members as a perpetual memorial of her appreciation of the profession.

*Resolved*, That a copy of this preamble and resolutions be engrossed, signed by the President and Secretary, and transmitted to Mrs. John Jacob Astor.

DR. T. GAILLARD THOMAS.—I second, most cordially, Mr. President, the resolutions just offered by Dr. Sayre. Let us recognize with pleasure a new era in the closer accord between medicine and the community in which we live, as evidenced by this graceful and generous gift. It is the olive-branch held out to us by an appreciative public, and it comes to us through the hand of a noble woman. As Dr. Sayre has said, it marks a new period in the history of our guild in New York. Let us hope that it will prove an earnest of the future, and let us mark our appreciation of it by an unanimous vote of acknowledgment.

The resolutions were unanimously adopted, and, after the transaction of unfinished business, the Academy adjourned to partake of the loving-cup.

## LIST OF PORTRAITS

which decorated the walls of the Library Hall and Parlor of the Academy, on the evening of October 2, 1879.

ABRAM DU BOIS, M.D., Benefactor (Painting), loaned by the Trustees of N. Y. Eye and Ear Infirmary.

JOHN STEARNS, M.D., President (Painting), presented by the family.

JOHN W. FRANCIS, M.D., President (Painting), loaned by the Trustees of Mott Memorial Hall.

VALENTINE MOTT, M.D., President (Painting), loaned by the Trustees of Mott Memorial Hall.

ISAAC WOOD, M.D., President (Photograph), presented by Isaac F. Wood, Esq.

ALEXANDER H. STEVENS, M.D., President (Painting), presented by F. W. Stevens, Esq.

JOSEPH M. SMITH, M.D., President (Painting), presented by G. M. Smith, M.D.

WILLARD PARKER, M.D., President (Crayon), loaned by the artist, Mr. Altman.

JOHN WATSON, M.D., President (Painting), presented by Mrs. Emily Watson.

JAMES ANDERSON, M.D., President (Painting), presented by the family.

ALFRED C. POST, M.D., President (Painting), loaned by the Trustees of the Presbyterian Hospital.

HENRY D. BULKLEY, M.D., President (Photograph), loaned by L. D. Bulkley, M.D.

EDMUND R. PEASLEE, M.D., President (Painting), presented by the estate.

FRANCIS U. JOHNSON, M.D., Vice-President (Painting), presented by John T. Metcalfe, M.D.

JOHN B. BECK, M.D., Vice-President (Lithograph), loaned by F. C. T. Beck, Esq.

GALEN CARTER, M.D., Vice-President (Painting), presented by the family.

GURDON BUCK, M.D., Vice-President (Painting), loaned by the Governors of the N. Y. Hospital.

WILLIAM DETMOLD, M.D., Vice-President (Engraving), presented by the family.

ALFRED UNDERHILL, M.D., Vice-President (Painting), presented by the family.

OLIVER WHITE, M.D., Vice-President (Painting), loaned by Mrs. White.

ISAAC E. TAYLOR, M.D., Vice-President (Photograph), presented by the family.

T. GAILLARD THOMAS, M.D., Vice-President (Crayon), loaned by Dr. John T. Metcalfe.

EDWARD DELAFIELD, M.D. (Painting), loaned by the Society for Relief of Widows and Orphans of Medical Men.

JOHN C. CHEESMAN, M.D. (Painting), loaned by Miss Cheesman.

JOHN NEILSON, M.D. (Painting), loaned by Mrs. Bleeker Neilson.

ROBERT WATTS, M.D., Treasurer (Painting), loaned by Dr. Robert Watts, Jr.

BENJAMIN OGDEN, M.D. (Painting), loaned by Dr. J. W. Barstow.

GEORGE P. CAMMANN, M.D. (Painting), loaned by Mrs. Cammann.

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ALONZO CLARK, M.D. (Crayon), presented by the artist, Mr. Kurtz.

GILBERT SMITH, M.D. (Painting), presented Dr. Charles D. Smith.

SAMUEL P. WHITE, M.D. (Photograph), presented by Mrs. Hartley.

SAMUEL D. GROSS, M.D. (Painting), loaned by Dr. Austin Flint.

DAVID HOSACK, M.D. (Painting), loaned by Mrs. J. Kearney Rodgers.

SAMUEL A. PURDY, M.D. (Painting), loaned by the family.

HORACE GREEN, M.D. (Painting), loaned by Mrs. Green.

JOHN C. LETTSOME, M.D. (Painting), loaned by Trustees of Mott Memorial Hall.

JOHN HUNTER, Esq. (Painting), loaned by Trustees of Mott Memorial Hall.

SIR CHARLES M. CLARK, WILLIAM HUNTER, JOHN HUNTER (Engravings), loaned by Dr. Isaac E. Taylor.

BENJAMIN F. BACHE, M.D. (Photograph), presented by Dr. Samuel S. Purple.

"BIRTH OF BACCHUS" (Painting), presented by the late Oliver White, M.D.

"DEATH OF LINCOLN" (Engraving), presented by Dr. Joseph Wiener.

"CONVENTION HALL" (Water Color), in which the meetings of the N. Y. Academy of Medicine were held (1847 to 1850), presented by Dr. Samuel S. Purple.

FOUNDERS OF THE MEDICAL SOCIETY OF LONDON (Engraving), presented by Dr. Joseph Wiener.



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NEW YORK ACADEMY OF MEDICINE,

1881.

SECOND

INAUGURAL ADDRESS

BY

FORDYCE BARKER, M.D., LL.D.

*President of the Academy.*

# NEW YORK ACADEMY OF MEDICINE,

INSTITUTED, 1847. INCORPORATED, 1851.

12 West Thirty-first Street.

Regular Meetings, First and Third Thursday Evenings in the Month.

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*The following Publications of the NEW YORK ACADEMY OF MEDICINE can be obtained of the Librarian, at the prices affixed; or the same may be had in exchange for medical works, etc., not already in the Library.\**

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	<b>Vol. III.</b>	<b>" 476.</b>		
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<b>Vol. I.</b>	<b>Pages 588.</b>	} Each.....	\$2 00
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<b>Vol. III.</b>	<b>" 470.</b>		
<b>Vol. IV.</b>	<b>" 264.</b>		

\* Single Parts of the above will be sold separately (when complete sets are not broken) at the rate of TEN cents for every sixteen pages.

### ADDRESSES AND MEMOIRS.

Dr. John W. Francis' Anniversary Discourse.....	1847.	\$0 25
Dr. John W. Francis' Inaugural Address.....	1848.	10
Dr. James R. Manley's Anniversary Discourse.....	1848.	25
Dr. Valentine Mott's Inaugural Address.....	1849.	10
Dr. Alfred C. Post's Anniversary Oration.....	1849.	25
Dr. Isaac Wood's Inaugural Address.....	1850.	10
Dr. Joseph M. Smith's Anniversary Discourse.....	1850.	25
Dr. Thomas Cock's Inaugural Address.....	1852.	10
Dr. F. Campbell Stewart's Anniversary Discourse.....	1852.	25
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Dr. E. R. Peaselee's Anniversary Discourse, "The Progress and the Spirit of Medical Science".....	1858.	50
Dr. Wm. C. Roberts' Anniversary Discourse.....	1859.	25
Dr. John Watson's Anniversary Discourse, "The True Physician".....	1860.	25
Dr. James Anderson's Inaugural Address.....	1861.	10
Dr. V. Mott's Eulogy on Dr. J. W. Francis.....	1861.	25
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Dr. Wm. T. White's Anniversary Discourse.....	1876.	20
Dr. S. S. Purdie's Inaugural Address on "Medical Libraries in N. Y.".....	1877.	20
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"Dedication of the Library Hall".....	1880.	25
Dr. Fordyce Barker's Second Inaugural.....	1881.	20

\* The Library, which contains seventeen thousand volumes, is open free to the Profession and the Public, from 9 A.M. to 6 P.M., and from 7 to 9 P.M., daily, Sundays and Holidays excepted.

SECOND

# INAUGURAL ADDRESS

*DELIVERED BEFORE THE NEW YORK ACADEMY OF  
MEDICINE, FEBRUARY 3, 1881.*

BY

FORDYCE BARKER, M.D., LL.D.,

PRESIDENT OF THE ACADEMY.



NEW YORK:  
PRINTED FOR THE ACADEMY,  
12 WEST THIRTY-FIRST STREET.  
1881.



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## SECOND

# INAUGURAL ADDRESS.

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### FELLOWS OF THE NEW YORK ACADEMY OF MEDICINE:

COMMENCING a new term of office, it is both my duty and my pleasure to express my warm appreciation of the honor which I have received at your hands with such unanimity. At the same time, I beg leave to say that I do not flatter myself that it is a tribute to professional ability and acquirement, but that it simply means an expression of confidence that the functions of the office will be performed with impartiality, zeal, and conscientious fidelity—and with that purpose I accept the duties. I regret to say that a kind of moral *vis inertiae*, which grows, unless resisted, with each year of our life, made me very reluctant to again assume the responsibilities of the office, but the present condition of the Academy and the especially happy epoch in which it has been my good fortune to be elected to the position seemed to make it an imperative duty that for one term more I should do my best to prove that I am not ungrateful for your partiality. As those of my predecessors in office now living are present, I am sure that they will all concur with me in the statement that no one before me has been so lucky in the time of their service, a time when circumstances have combined to make what reputation the position gives easily won. The fruit of the years of the zealous labors of my predecessors and other untiring, honest workers for the Academy of Medicine was ripe and ready for harvest. Thirty-four years ago all of the best men in the profession united in the organization of this Academy, for the purpose of the culti-

vation of the science of medicine, the advancement of the character and honor of the profession, the elevation of the standard of medical education, and the promotion of public health.

While in fulfilment of this design, we can justly claim that it accomplished very much more than many who have not made themselves acquainted with the direct result of the work incited by the Academy are aware of, yet for many years it struggled under the disadvantage of having no home of its own where common affections could centre, and where it could accumulate the treasures of the literature of the past and present. But at last, through the persevering zeal and untiring efforts in an ungrateful and thankless work of solicitation by some of our number, who deserve the gratitude of the profession of the present and coming ages, sufficient funds were secured to warrant the purchase of the building now owned by the Academy. At this time the Academy had no library worth speaking of, as all together, its books did not constitute a tithe of the worth of many private medical libraries in this city. Next in the order of events came the presentation to the Academy, by its then President, Dr. S. S. Purple, a library which could not now be purchased anywhere for \$10,000, and indeed some of its volumes could not be again found. It is in some respects unique. This munificent donation demonstrated the necessity of a new library hall, as it constituted a nucleus about which the growth of a large library, such as the profession of this city absolutely demands, must be inevitable, and is rapidly securing.

It will now be seen that no one of my predecessors was ever so lucky in his epoch, for on the evening of my inauguration it was announced by my predecessor that he was authorized "by a very worthy and distinguished member of the profession, who has called upon me, and has manifested his appreciation of your liberal efforts to advance the social interests of the profession, by a pledge of \$5,000 of the amount required to build the extension and make the necessary alterations of this building according to the plans which were submitted to you by your Committee on Ways and Means in 1875.

The only condition of this noble benefaction is that this Academy shall raise the remaining \$2,000."

I must confess that I was both surprised and pained by the little evidence of enthusiasm with which this announcement was received, not, it was apparent, from doubt as to the genuineness of the offer, but from an incredulity and an indifference as to the possibility of raising from members of the Academy the additional sum required. Indeed, I noted the fact that I heard a sufficient number of those belonging to the profession express their disbelief in the accomplishment of this end, who could have raised this sum by their own contributions without doing injustice to their families or largely exceeding the debt which they themselves owe to the profession.

But thanks to the efficient labors of a Subscription Committee, who performed the thankless duties assigned to them with untiring zeal, unremitting work, and pertinacious courtesy, and thanks also to the excellent spirit of a large number of the Fellows of the Academy, who subscribed as largely as their means would warrant, the sum of \$3,000 was raised, which not only secured the pledge of \$5,000, but our wise and generous benefactor added \$3,000 on condition that the \$3,000 subscribed should be given to the permanent Library Fund. Thus it is that we now have our agreeable, convenient, well-lighted, and perfectly ventilated hall.

But the interest of our generous benefactor did not cease with the completion of the hall, for he has largely contributed to our library. The niche over my head was filled by him, and his orders still remain to add to their number such of the new medical works as are not supplied by the generosity and wisdom of their authors.

This Library Hall is a monument more enduring than brass or marble to keep the name of Abram DuBois fresh in the memory of coming generations of the profession, and a legacy of a stamp of nobility for his descendants. To paraphrase a sentence from Marmontel, "Such a legacy is a letter of credit which will be accepted on the security of their ancestor, with a full confidence that it will be redeemed with honor."

I regret to say in regard to my immediate predecessor, who by his noble gifts of books made a library hall for the Academy of Medicine an imperative necessity, that unless he make haste to redeem the time by matrimony, his stamp of nobility is not likely to be perpetuated by descendants in a direct line.

I have thus briefly and hastily sketched the auspicious conditions on which I entered upon the duties of my office, when I first received your suffrages. The history of the past two years of the Academy has been that of rapid and uninterrupted progress in every direction. The most notable of events has been our marriage with the Journal Association, which added largely to our library, and also to our moral and intellectual power. Unnatural jealousies, unfounded distrusts, rivalry quite distinct from honorable competition, have in a great measure been buried, and I think we have every indication for the belief that we have now *una fides altare commune*, and that we shall work together most harmoniously and most efficiently. It is said that at the signing of our Declaration of Independence one of the members remarked, after writing his name, "we must now hang all together." "Yes," replied John Hancock, "or we shall all hang separately." The moral of this anecdote is so obvious, that I need but quote the wise law of Jack Bunsby that "the bearing of a remark lies in the application on't."

Our library now contains over 17,000 volumes, exclusive of pamphlets, and is, I may say, with almost literal truth, daily increasing. By the will of our late lamented and distinguished fellow, Freeman J. Bumstead, we received his medical library, the most complete and valuable collection of works and writings on syphilography, as is said by those competent to express an opinion on the subject, to be found in any public medical library in the world. In the future we are destined to receive many more such contributions. I can speak with absolute certainty of one, which will eventually find a place in this hall, which its owner is seeking to make as complete as possible in the English and French bibliography of obstetrics and gynecology.

By a munificent gift from Mrs. John Jacob Astor of \$500 to be appropriated to the Circulating and Journal Department of our library, I am informed by the Chairman of the Library Committee, that the facilities for loaning journals and certain classes of books will be speedily made all that can be expected or desired. It was greatly regretted that the financial condition of the Academy would not permit the accomplishment of so important an object at an earlier period.

The scientific work of the Academy has for the past two years been most satisfactory. Papers of unusual merit and importance have been read on various subjects pertaining to pathology, general medicine and surgery, therapeutics, and the various special subjects of obstetrics, gynecology, dermatology, laryngology, otology and ophthalmology, and the reading of these papers has been followed by able discussions, which have attracted notice and been largely reprinted in both American and European journals. These discussions have been very valuable, because they have called out our best and ablest men, known to be experts in the special subject of the paper read, and they have given the results of their careful study and large experience. We have rarely been compelled to listen to platitudes or crude statements of facts already well known to every intelligent and educated man. We have seldom been tortured by the flippant loquacity of garrulous pretension and assumptions, but we have had new reasoning, new statement of facts, new therapeutical suggestions, worthy of consideration and trial. During the past two years I have not been absent from a single meeting of the Academy, except when I have been out of the city, and I can honestly assert that there has not been a single meeting from which I have not learned some new facts, and new suggestions which I should not have otherwise acquired. This I say without any disparagement of the very excellent reports by our Associate Fellow Dr. Wesley M. Carpenter, published in the *Medical Record*, or the more condensed reports in the *Gazette* and *New York Medical Journal*, but because I think it generally true that what we learn through the ear is more emphasized and more

clearly absorbed in the mind than what we acquire through the eye by reading. In a letter, which I received a few days since, from a very distinguished surgeon of the Southwest, he writes: "When I receive the *Medical Record* I look first for the report of the meeting of the Academy of Medicine, for in this I am always sure to find something which I did not before know. What surprises me most is the great number of able and cultivated men you must have in New York, for, unlike the proceedings of most medical societies, I do not see the same names as speakers at every meeting, but each meeting brings out some new names which I have never heard of before, who speak to the subject so ably that I am sure that in your city they must be or soon will be great men in our profession, or at least in some branches of it." Remarks of a similar tenor have often been made to me by physicians from other parts of the country when visiting the city.

I take this opportunity to refer to the necessity of having the papers read before the Academy and a report in full of the discussion of these papers, published by ourselves at short intervals. Now our papers appear in some one of the medical journals, while only brief abstracts appear in the other journals, both of the papers and the discussions. In the interest of science and the progress of medicine, it is most important that these all may be found complete in one publication, and equally in the interest of the Academy for the purpose of keeping up our exchange with other learned societies in this country and in Europe. At a recent meeting of the Council of the Academy, Dr. John G. Adams proposed a most feasible scheme for the accomplishment of this purpose, until the Academy acquires a sufficient income from its funds to do this without recourse to the personal liberality of our Fellows, an event not far distant. I venture the assertion that the publication of our Transactions at short intervals will soon commence. This will not in any way interfere with the work or privileges of our medical journals, which the Academy should always be most anxious to encourage and sustain. In this connection I beg to refer to a topic which Dr. Jacobi brought before the Academy at a recent

meeting, but unfortunately it was just before the adjournment when a portion of our audience had left. I refer to the continuance of the publication of the *Index Medicus*, a monthly classified record of the current medical literature of the world, unique in its conception and design, invaluable for every man who wishes to investigate what is known and being done in every department of medical science and practice. It would be a national disgrace to the profession of this country to permit this enterprise to fail from want of pecuniary support. For two years Mr. F. Leopoldt has published this with a very considerable loss. He does not ask a return for what he has already sunk, but only a support for the future. It seems to me that every Fellow of this Academy who can afford to pay the annual subscription, and who has the least conception of what is due to the profession, is bound in honor to give this most important work his aid.

One of the avowed objects of the Academy is the promotion of the public health. What it has already done in this direction has been put more forcibly by our Senior Ex-President, Dr. Willard Parker, and published by a reporter in a recent number of the *New York Herald*, than I have ever before seen it. Dr. Parker claimed, and who shall say that the claim is not well-founded, for the New York Academy of Medicine "the right to recognition as the fountain-head of whatever excellence New York may boast as to sanitary regulations, the right to style itself the bulwark between disease and the public weal; and thus it has been worth to this city, by its services, millions of dollars. For to the Academy, New York is indebted for the existence of its protecting Board of Health, a board that has warded off disease that might have involved the loss of thousands of lives and millions upon millions of property. The Academy set in motion the efficient Board of Health that did that great work of stamping out cholera which saved untold lives to the State. This offspring of the Academy has inspired most of the legislation upon hygiene ever since, reforming our buildings, giving us improved sewage, checking the adulteration of food, and especially of punishing those



who have destroyed unnumbered children with adulterated milk." He gives many other illustrations of the invaluable work which has thus been effected in this direction, which lack of time will not permit me to quote in full.

If the public of this great commercial society could only be made to appreciate the great pecuniary loss which is due to the violation of sanitary laws, it would be roused to most efficient action for its protection. Notwithstanding the fact that New York is more favorably situated than any other large city in the North or in Europe for the best sanitary conditions, its rate of mortality is in excess of others. A large part of this excess of our death-rate is undoubtedly due to causes which could, and ought to be controlled by municipal regulations, and thus the lives of 6,000 persons might annually be saved. The pecuniary loss to this city from these causes can be with difficulty estimated, but it is safe to state that it amounts to many millions of dollars annually. The loss to Philadelphia from the ravages of small-pox in 1871-72 have been estimated by competent statisticians as nearly twenty millions of dollars. The pecuniary loss to this city the present year from diphtheria, scarlet-fever, typhoid fever, pneumonia, and other diseases generated by preventible causes, such as defective plumbing, bad sewage, filthy streets, and a poisoned atmosphere, beyond all question would pay our city debt and reduce our taxation if it could have been saved and applied to this purpose.

A few weeks since I had the pleasure of perusing a paper entitled "What the State owes the people, Public Health is Public Wealth," which was read before the American Public Health Association, at its meeting in New Orleans, in December last, by the Hon. Erastus Brooks. It struck me that it would be wise to borrow the plan of religious propagandists, publish the paper as a tract, and circulate it by colporteurs among all the reading public of this city. It ought to be followed by another tract, by an equally competent writer, entitled, "What shall we do to be saved."

If the public were once made alive to the importance of this subject, no political charlatans would ever be permitted the

expensive economy of cutting down the necessary expenditures of a health board in its health-saving, money-saving, life-preserving work. We live in an epoch when public opinion is a moral force greater than the power of armies or the influence of political parties. All that is needed is the awakening of the intelligence and convictions of the public. I have found the error very prevalent among our citizens that the dangers which arise from the public neglect of sanitary laws are chiefly confined to the poorer classes and those living in crowded tenements. All, however, agree that it is a burning reproach to the civilization of the age, and a still greater stigma upon our governing authorities, that the avarice of a few hundreds should be permitted to make miserable, unhappy, and, as I absolutely know, in some cases, positively ill, hundreds of thousands of our population by establishing manufactures in our suburbs which fill our atmosphere with noisome, offensive, and unhealthy effluvia.

The truth is that in some respects the peril to those who are able to live in the most comfortable and even luxurious circumstances is greater than to those of the poorer classes. The danger to which all of us are exposed, despite such precautions as most take, is infinitely greater than that from assassins and desperate burglars, for we have no protection in the use of revolvers or other weapons of defence. Our assailant is a stealthy insidious poisoner. Within a comparatively recent period I have seen three young men of character, promise, and position stricken down and die from this poison. If my confreres now present could give their experience I am sure the number of such deaths would cause an alarming surprise to many who now do not give a thought to the subject. To how many in the city might not the words of the poet be applied as an epitaph:

“He ate, drank, laughed, loved, lived, and liked life well,  
Then came—who knows—some gust of jungle wind,  
A stumble on the path; a taint i' the tank;  
A snake's nip; half a span of angry steel;  
A chill; a fish bone; or a falling tile—  
And life is over; and the man is dead.”

Medical men who have a good professional reputation are not usually regarded by the public as strong either as business men or as politicians, whether they act as individuals or as organized bodies. But they do have great power in moulding public opinion on all subjects on which they are known to be better informed than others. On all these matters, which I have just been discussing, they ought to be able to influence legislation, and no doubt they can, when they make zealous efforts.

I therefore believe that I am warranted in asserting that the Fellows of the Academy of Medicine are in hearty sympathy with the purposes of the New York Sanitary Reform Society, and are most anxious to give it all the aid in their power. I am sure that every one of us feels the importance of an improvement in tenement-houses, as regards an adequate supply of air and light, and the prevention of defective and dangerous plumbing, the abating of nuisances which affect the public health, such as those at Hunter's Point, and to secure the supervision of the Board of Health over the plumbing of all buildings hereafter erected in this city. Bills designed to attain these various ends are now before the Legislature, and intelligent, zealous action on the part of the profession in instructing those whom they know of its honorable members may contribute essentially to secure their passage. This Society, it seems to me, has evinced great wisdom in devising only practical and feasible schemes, which must receive the approval of every sensible thinking man.

It remains for me to add a few words in regard to the Academy. Within the past eighteen months over eighteen thousand dollars have been subscribed and paid by members of the Academy for building its hall and the improvement of its library. At present it is impossible to ask those of the profession who have proved their readiness to do all in their power, to do more now; although in the future, as in the past, their efforts in this direction will be continued with unabated zeal.

The value of the property now belonging to the Academy, as represented by its hall, its equipments, and its library, was appraised last year at \$81,430. On this is a mortgage of

\$10,000, which constitutes the whole debt of the Academy. Its income from annual dues of its members and admission fees from new members is sufficient for its current expenses, but the interest on the mortgage allows but a small surplus for keeping up the library in the purchase of books, for appropriations for binding the journals, and, except for the generous donation of Mrs. Astor for this year, for adding what is most desirable and even necessary, subscriptions for duplicate journals and books which can be taken out.

The profession of this city have never asked aid from the public in their efforts to secure for its members the highest culture and erudition, to keep them abreast with the rapid progress of science and improvements in practice, and to make them positive contributors to its advancement. In Europe the profession are stimulated and assisted greatly by contributions from private individuals and appropriations from the state.

Every intelligent man must appreciate the importance of a medical profession of the highest character for such a city as this, not only as most necessary for suggesting and promoting every measure to preserve the city from epidemic diseases and devastating pestilence, but for the protection of himself and family. Hardly a month passes that some new discovery is not made, either in science or in practice, which may be a means of saving life under conditions which may occur to any one, and so the vital utility of having such knowledge diffused among the profession may become of the greatest importance to every one.

It has been thought that at least one hundred men may be found in this city who so perfectly understand this, and who so appreciate its importance for themselves and their families, that they will esteem it both a pleasure and a privilege to place the Academy of Medicine in such a position as will enable it effectively to accomplish its high aims by the contribution of \$100. A pressure of other engagements has not allowed me the time to present the matter to a large majority of such of my friends as I think will respond favorably to the call, but I have great pleasure in saying that I have not yet met with a

single refusal, and have already deposited in bank several hundred dollars which have been given to me for the object. The Academy will also have great satisfaction in learning that, through the hands of Dr. Abram DuBois, Dr. William H. Van Buren, and Dr. Henry D. Noyes I have received from their friends one check of \$200, and others of \$100. The names of the donors will, in due time, be published.

The late distinguished Dr. John Ware, of Boston, in one of his addresses published some thirty-five years ago, expressed the opinion that the public no longer believed in the profession as a body, but that there only remained such personal confidence as individual members might secure. However true this may have been at that time, I think that we must all say that it is very much less true at the present day. This result is chiefly due to our medical societies, which have led to the cultivation of social intercourse and the intimacy of personal relations that break down prejudice, prevent depreciation, and develop the feeling of common brotherhood no less important than their influence in stimulating their members to greater mental activity, to higher culture, and to the literature of the profession. On the one hand, we, in the profession, have had some grounds for feeling that the public have unjustly charged us with being opposed to progress and rejecting everything new as untrue. Our mistake has not been in opposing errors, but in our methods of opposing them. As the late Bishop Wilberforce, a man as remarkable for his wisdom as his wit, said in the last address that he ever made, "All errors that have spread and become formidable, rested upon some truth. If not, they could not for a moment survive the light of day and the light of discussion. So the history of error is always the same. First, the outcoming of truth; then the exaggeration of that truth; lastly, the distortion of the truth. If there were no truth in it, no earnest man could be misled by it."

There is something in human nature, when developed by moral and intellectual training, which revolts against every thing that has the appearance of injustice. When the public see men whose honesty, whose education and scientific attain-

ments they regard as unquestionable, denounced as dishonest, as quacks, or as knaves, excluded by those whom they consider as belonging to the same guild, not merely from professional but also from social intercourse, is it surprising that their sympathy and even support should be given to what we believe and even know to be false in science and futile in practice? I ask if it be not true, that at the present day, most of us see that by this mistake in judgment on the part of our predecessors as a body, a school in medicine has been created and perpetuated for nearly a half century, and supported by a respectable and cultivated minority of society, in all parts of the world? Is there any one who believes that if the meagre truths which this pseudo-school has unquestionably developed had been frankly accepted, its errors kindly exposed, and its individual supporters treated with that wise charity due from a liberal profession, that it would now have any existence in the estimation of the public as an antagonistic school?

There has been a great change in the profession within the past thirty years, not only in this regard, but also in many other particulars, which I will not detain you by enumerating. There is also a corresponding change in the relations which the profession holds to the public, as has already been indicated in my former remarks. I doubt whether, in any former age, the medical profession has been held in so high estimation, and whether in any other city in the world it has held so high a position socially, or is on the whole better remunerated for its professional work. Many of our more wealthy people do not content themselves with paying the bills sent to them by their medical attendants, but often add a most generous honorarium. Thus I am informed on the best authority that one received at the commencement of the year a check for \$10,000, and another of our number a check for \$5,000. There are many of us who are remembered at the Christmas holidays, by grateful patients, who send presents of silver and bronze, works of art, and luxuries of an aesthetic character, as an expression of a grateful appreciation for professional kindness and skill. We should not expect or look for such generous appreciative liber

ality, but we should aim to deserve it from all who confide the health of themselves and their families to our hands. We can see very clearly how largely the community is indebted to the profession. Let us be careful not to forget what we owe to the community. But I have no intention or right to improve the occasion by a sermon, as I read on the faces of some before me a prompt readiness to do honor to the beautiful sentiment, selected by a lady who has proved one of our most generous benefactors and is engraved on our Loving-cup, "May peace and love be multiplied unto us."



# VALEDICTORY ADDRESS

BY THE  
RETIRING PRESIDENT,

FORDYCE BARKER, M.D., LL.D. (COLUMB. ET EDINB.)

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*DELIVERED BEFORE THE NEW YORK ACADEMY OF  
MEDICINE, FEBRUARY 5th, 1885.*



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1885.



## VALEDICTORY ADDRESS.

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### *FELLOWS OF THE ACADEMY:*

IN now closing my official relations with the Academy, it is both a pleasure and a duty to briefly recall the more prominent features in its history during the period of this connection. I will also venture to offer a few suggestions derived from my long experience in this position, as to some points relating to its future growth, its increasing usefulness, and its influence on the profession. As I know you will be impatient for the intellectual feast which is to follow in the address of my successor to this Chair, I shall be as brief as is consistent with a clear statement of the points to which I think it desirable to ask your attention.

It has been my good fortune to hold this position when the profession were becoming more alive to the importance of this Institution, and more and more ready to contribute material aid for its growth and support. At the same time, there was a new development of mental activity in the profession, not only in this City, but all over the world, demonstrated by great and important discoveries in science, and a wonderful increase and valuable additions to medical literature.

As I have referred to these facts more in detail in former addresses before the Academy, I will not detain you now by further allusion to them. I will only briefly refer to a few of the most notable events connected with the Academy, during my administration.

First to be mentioned is this new and commodious Hall, which could not then have been built except for the munificent donation of one noble benefactor, Dr. Abram DuBois, and the contribution to the full extent of their hard-earned means by

many others. We are rapidly out-growing our new Hall, and must soon have another, as our library is now nearly filled. As I learn from Mr. Brown, our excellent assistant librarian, the Academy had, when this Hall was built 1879, about 9,000 volumes; it now has about 25,000 volumes and 15,000 pamphlets. Its circulating department has about 6,000 volumes, which our Fellows can take out of the library for consultation at home. In our Journal room, open as is the library for all who may wish to read in our rooms, there are 225 medical journals in all languages in which there is to be found a medical literature.

The Academy is greatly indebted to Messrs. Wm. Wood & Co., and D. Appleton & Co., for large donations of their new publications, and I believe to some foreign and other American medical publishers. We gratefully acknowledge the generosity of these gifts, and we feel assured that they were made from entirely generous motives. But we may be permitted to express the conviction that both publishers and authors will find it a wise business policy to place a copy of every new medical work in our library, as it has been estimated by a competent authority that one copy of every new good book in this library will secure the sale of at least ten more. The library is visited not only by the profession of this city, but by medical men from all parts of the country, who come to this great metropolis. They have seen in some medical journal a notice of a book, but have not remembered who were the publishers; in coming to our library, they examine it to see if it is what they want.

The next notable event in the history of our Academy, since I have held this position, is its absorption of another very important organization, the Journal Association, which, to quote from a former address, "not only added largely to our library, but also to our moral and intellectual power."

The truth of history demands that the fact should be mentioned that, nearly two years ago, the Academy passed through the segment of a cyclone; but, like a good steamship driven over a sandbank near a lee shore, with its engines temporarily

disabled, it escaped being hogged, its seams were not opened, its barnacles have been scraped off, its bottom has been cleaned, and it has since gone on its voyage with favoring winds and fine weather. All who are familiar with its past history, and who are unbiased by personal feeling or prejudice, must agree that the Academy has more nearly approached its avowed aims and its high purposes during the past year than in any former one since it was founded. It has had a larger increase of prominent men, and of young men of promise, than in any previous year since that in which it was organized, with the exception of the year when the Journal Association came into it. More than four times as many papers have been offered to me than there have been sessions to listen to them, and as these sessions had been promised to previous applicants, months before, very many of these papers have been withdrawn. I have afterwards seen them, not only in the medical journals of this city, but others in the journals of Philadelphia and Boston. It is bare justice for me to add that I have generally found them to be of such merit that I greatly regretted that the Academy could not have had the credit of their first publication.

The papers which have been read at our meetings have been characterized by careful preparation, thorough research, original and often valuable hints as to pathological examinations and therapeutical indications.

Our discussions have been of such excellence that I am quite certain that every one carries away from our meetings either new suggestions or new information, which amply compensate for the evening passed in this Hall.

In a scientific body like this, all discussions should express the results of mature inquiry, and a clear and forcible statement of the reasons which have led to positive practice. In some papers, the novelty of opinions advocated and the original methods of practice proposed, whether medical or surgical, may be so exclusively a matter of individual experience that all discussion must be necessarily limited at first to inquiries and *a priori* objections, founded on anatomical, physiological,



or pathological grounds. Papers of this class should be the subject of a most thorough and searching examination; for they may be either mischievous, and their effect for evil must be effectually exposed, or they may possess positive value which should lead to prompt acceptance and adoption.

To secure such discussion as will represent the most advanced knowledge of the Academy on any special topic, I have at our recent meetings adopted a plan first introduced by Dr. V. P. Gibney. Writers of papers have been requested to send to a few of those whom they knew to have given special attention to their subjects, the points which they would suggest for discussion, printed on a small slip of paper, and especially asking those who held different or opposing views to take part in the discussion. They thus have time to arrange and formulate their knowledge and opinions, and the time of those present at the meeting is not wearily wasted in listening to crude, profitless, and digressive talk.

The reports of the Treasurers of the Academy and of the Board of Trustees have already been before the Academy. While its financial condition is now better than ever before, there still remains much to do. A few weeks since, a Committee of Ways and Means were appointed, of which Dr. Gouverneur M. Smith is the Chairman, to solicit contributions to pay off our only debt, a mortgage of five thousand dollars. They have worked with great zeal and enthusiasm, the Fellows of the Academy have responded with self-sacrificing generosity; the necessary sum has not yet been wholly secured, but the prospect of soon accomplishing this is most encouraging. We particularly need money for preserving our library by book-binding. It will be remembered that last year a generous sum was given for this purpose by a lady, who has in many instances shown that she is as warm a friend to the Academy, as she is conspicuous for her readiness to aid every good work by munificent support. Many of our Fellows have also most liberally added to the beauty of the Library in this way, and have rendered great service in the preservation of our books in good condition, which otherwise would speedily deteriorate.

I have long contemplated offering some suggestions on the present occasion as to the wisdom of a change in our By-laws relative to the duties and functions of the sections. Only one of the sections, that of Obstetrics and Diseases of Women, has kept up an active organization, done excellent work, and made regular reports to the Academy since my official connection with it. Two or three only of the other sections have reported their organization, by the election of a Chairman and Secretary; and this has been all. Two have appointed a Fellow to read an original paper before the Academy, one of which, a most valuable paper, was read before us. The other I have never been able to get, and as four years have now passed since that time, I do not think it very probable that it ever will come before the Academy.

The founders of the Academy did not contemplate making these sections independent societies for special work, but as contributing aids to the high aims of the central power. I had proposed to suggest such a modification of Article XVII., Section 2, as would assign to the sections functions similar to those of the Academy of Medicine of Paris. But we have not the time now to consider the details of such a change, and I leave the matter for future consideration by the Academy, and my honored successor.

Neither did the founders of the Academy intend to absorb or concentrate in itself all the scientific work of the profession in this city. The whole spirit of its high aims and purposes indicate that, on the contrary, they desired to stimulate and encourage such work in every feasible direction. I hope the time is not far distant when the Academy will be so well endowed that it may offer to all such societies, as the New York County Medical Society, the Pathological, the Obstetric and the Surgical Societies, and the youngest of all, which has begun its career with excellent scientific work, the New York County Medical Association, a home for its meetings free from all expense.

Our standing committees have always faithfully discharged their important duties, with one exception, and that is the



Committee on Medical Education, which has had little to do, and it has just done this and nothing more.

I may now be permitted to ask if the time has not come, when it should be one of the most important and useful of all of our standing committees, in carrying out one of the objects of the Academy as declared in our Constitution, "the elevation of the standard of medical education." How can this best be accomplished, is the question.

It seems to me that a way is now open for this Committee to do effective work in this direction.

For years the medical profession in all parts of the country have been agitating the question of separating the licensing power to practise medicine from the teaching power.

It is a subject of great importance to the profession, to our medical schools, and equally so to the community. It must be met and settled in a way that will be most effective for good, but this cannot be done at once. There are two ways by which this can be accomplished, but each would require time.

One way involves the division of the profession into contending parties, each most zealous to carry its point, heated controversies which always provoke personal feeling and personal antagonism, an appeal for action of societies, and a struggle for majority votes, not only in medical societies, but in securing legislative action; all of which would undoubtedly affect injuriously our medical colleges and lower the profession in the estimation of the public. Any good secured would be at a great and unnecessary cost. The public cannot understand medical controversies except from what appears on the surface. A "doctor's quarrel" seems to the non-medical community like a fight between drunken men in the dark. The late Mr. Charles Dickens once related to me a story which he had heard, of how Sidney Smith convulsed with laughter a dinner company at Holland House, by his description of a duel between two doctors. The mode of warfare was croton oil on the tips of their fingers, trying to rub each other's lips.

Now this question is one which belongs to the domain of reason, and let us hope, for the honor of the profession, that

hereafter it will be confined to the region of argument, and that in due time it will be settled to the satisfaction of all who are actuated by pure motives and a desire to secure the best results. At the last meeting of the Academy, some resolutions were offered, but by the courteous consent of my friends, the mover and seconder of the resolutions, they were laid on the table for future consideration. I therefore feel that I have now the floor and venture to throw out a few suggestions as to the other method of meeting this question.

In order that the standpoint from which I look at this subject may be perfectly understood, I will briefly state a few propositions which seem to me common ground upon which we all stand, and from which we must start.

Where charters for medical colleges can be easily obtained from State legislatures, it is a duty which the profession owes to the public as well as to itself, to protect the community from ignorant, unprincipled practitioners of medicine, who not only swindle their victims, but jeopardize health and often sacrifice human life.

This is a matter of great difficulty where each State is an independent sovereignty as to all such laws, where there is no central power to control action, and where personal freedom of opinion and conduct is zealously guarded as to everything which does not interfere with the right of others as regards health and property.

The interests of the medical profession are so closely allied with the medical colleges that what affects detrimentally the one must reciprocally injure the other.

The profession has a perfect right to supervise the methods and exercise a controlling influence over those who by law are permitted the privilege of giving a diploma which is effectually a license to practise medicine.

All wise legislation must be based on a thorough knowledge of all the conditions which demand special law ; it cannot be evolved from the inner consciousness of any one who has only the spirit, the zeal, and the genius of reform, but must be derived from the accumulated wisdom and experience of the past.



Mere examinations by a special board who have had no previous training in this direction, no personal acquaintance with the mental characteristics, the habits of study, or the personal conduct of the candidate, would be as unsafe a test for admission to the profession as any objection that can be urged against the present system. Injustice would be done to some, while flip-pant readiness in reply, which can be easily attained by a quick, bright mind by a few weeks of cramming, without either solid acquirement or sound judgment, would always secure success.

The experience of all countries has demonstrated the necessity of examinations by the teaching faculties, and the wisdom of their assent to a license to practice.

But in all other countries except this, there is an additional protection to the profession and the public by the concurrence of another power.

In the Edinburgh University and in some other medical institutions of Great Britain, this is vested in a special Board of Examiners. In France, this is under the direct control of the government. The Minister of Public Instruction has not only the power of granting or withholding the diploma, but, in addition, even in this so-called republican government, he has the power of retiring any professor whose teaching is not abreast with the times. In Germany also, while the methods vary in different universities, and in different constituent parts of the empire, it is yet under government control, which I believe is always exercised wisely.

Now I offer the suggestion that a committee of judicious, wise, and unprejudiced medical men, which would represent the best interests of the profession, the medical colleges, and the public, could frame a law, with the aid of competent legal advisers, which would combine the two methods, in accordance with the spirit of our republican institutions and the sentiments of our epoch, and thus save the profession from unfortunate and heated controversies, and from crude, hasty, and ever-changing legislation.

Would not the demands of the most progressive members of the profession be satisfied if the Regents of the University

were empowered by law to appoint the Committee on Education of the Academy of Medicine a supervisory Board of Examiners for the medical colleges of this city, whose duty should be to make an annual report, not only as to the examination for diplomas, but other details as to the instruction and education of the student. This committee should be enlarged to the number of the principal departments of instruction, and should serve without pay, for there can be no doubt that the best men in the profession who have the time would esteem it a high honor to serve on such a committee.

For the medical colleges in other parts of the State, there would be no difficulty in devising a method by which the Regents would appoint men for the board of supervisory examiners who would be most satisfactory to all.

None except those who are well acquainted with the facts can appreciate the immense advance which the medical colleges of this city have made within the past quarter of a century in teaching, and the increased facilities for acquiring a thorough education in all departments.

I have also great pleasure in referring to two other schools, the "Polyclinic" and the "Post-Graduate Medical School and Hospital," which have been doing great work for the more thorough medical education of those who have diplomas, and thus necessarily for the "elevation of the profession," within the past three years. I do not believe that one in fifty of the profession of this city have the least conception of what these schools are doing. If I expressed in moderate terms my estimation of the importance and value of their work to the profession of the country, I should be regarded by many as either carried away by my enthusiasm or prompted by personal considerations, so I will only say, Go and see for yourselves. Medical men who come to this city, and who always keep up their professional interest, should not fail to visit them and see what clinical teaching and clinical opportunities are found here, with all the equipments for their utilization, and they will be well repaid for the time given up for this purpose. This system of special clinical improvement originated in Germany, and nine



or ten years ago I seized an opportunity to visit the most prominent of the polyclinics in that country. Undoubtedly they have greatly advanced within this time; but I assert that then none that I visited were either in clinical advantages or clinical teaching on a level with our own at the present time.

I take the liberty of suggesting that it would be a wise and politic movement for the medical colleges of this city, the "New York Polyclinic," and the "New York Post-Graduate Medical School and Hospital," to take the initiative, and invite the Committee on Medical Education of the Academy of Medicine to visit these institutions, study their methods and their equipments, and report the result of their observations to the Academy at its annual meeting in January, 1886.

It must be obvious to all that this great improvement in medical education, far beyond the elementary teaching of former times, implies a corresponding elevation, not merely in the level of the average of the profession, but a still greater growth in the higher standards of medical science and literature.

Thus the inquiry is naturally suggested, What is the future of this Academy, what is to be expected from it, and how is it to be placed on the high plane where it should stand in reference to the profession, not only of this city and this country, but of the world? A wise forecast will early plan to secure a result which it desires to attain.

While our educational institutions are steadily improving their facilities for training the young men who are about to begin their career, and our Polyclinics and Post-Graduate Schools are more thoroughly preparing them for the higher grades of the profession, such an organization as our Academy of Medicine, in the great metropolis of the country, should be an ultimate centre at which all those who have been long enough at work to find out their individual vocation should have every opportunity to carefully study all the literature of past ages, and make original investigations in every possible field of medical science which can add to its importance. All short of this will be just so far a failure of the true mission of the Academy.

Thus far, which is only a beginning, the Academy has done its duty in bringing together most of the best men of the profession and making them acquainted with the special ability of each, in collecting a most creditable library for consultation, research, and circulation, and in stimulating and bringing out good literary scientific work.

What the Academy requires in the future is:

First. A large fire-proof building, with ample room for a library containing all the medical literature of past and coming times, and including:

Second. A large hall for its meetings, and others for smaller societies and committees.

Third. A large room for a museum, illustrating physiological and pathological anthropology, and which should include a craniological series, a pathological series, and a series of sections and dissections illustrating topographical human anatomy, and a comparative anatomy series.

Fourth. An anthropometric laboratory, provided with the best means of measuring human bodies, the faculties, and everything cognate to these subjects, and which should include a set of psychometrical instruments and everything pertaining to the series.

Fifth. A lecture hall, connecting with the laboratory and fully equipped with apparatus for lectures and demonstrations of all kinds.

Sixth. It should also have a thoroughly educated and trained pathologist, who should, by means of an adequate salary paid by the Academy, be able to superintend all the scientific work and report on the specimens furnished to him; and also a first-class mechanic, skilled in brass and glass work; and a good practical phonographer.

This is a broad scheme which will require a very large endowment, but it is my firm conviction that it only outlines the future of the Academy, even if it demands a million of dollars.

The liberality of New York is as boundless as its wealth, when convinced of the worthiness of its object. But large wealth is subjected to perpetual annoyance from solicitations,



and to criticism from those who have some pet end to promote, which they deem the most important above all others. This kind of discipline trains wealth to the exercise of discrimination and judgment, and besides it has its own convictions as to how its surplus can best be employed.

The position of the possessors or representatives of great wealth in this country is peculiar and anomalous, and the thinking men of this class, and there are many, perfectly comprehend this.

There is no reason to suppose that there will be any exception in this country to the general experience of the world in the past, which is, that those who have but little or no property will always greatly outnumber those of large wealth. The position of the owners of great wealth is at once peculiar and anomalous with us. Heretofore, property has protected itself through its representatives, by monopolizing or controlling the law-making and the law-administering power. With us the condition of affairs, if not actually reversed, has certainly been brought within the possibility, if not the calamity of absolute reversal; inasmuch as through universal suffrage, untrammelled by conditions of property, and absolutely (in theory at least) free elections, the control of all law-making bodies and the appointment of all law administrators, has come to be possible with those "who have not" rather than "to those who have."

Property or its representatives, and more especially the representatives of very large wealth, are therefore exposed to dangers in the future with us, through arbitrary or destructive legislation, which have not existed or do not now exist in any other country. The possessors of great wealth, in virtue of their superior education and knowledge of the use of methods, may be able to guard themselves in the future, as they have in the past, but this will turn on the fact whether they have a clear perception of the situation, and the sagacity to avail themselves of the two strictly legitimate methods for protection open to them for adoption.

The first of these is to bring to the masses, in whom all political power rests, a full realization of the fact, that nothing



so undermines the prosperity of a state, or so quickly impoverishes the people, through the arrest of industrial growth, as the impairment or the menace of impairment of the rights of property.

The second is the demonstration by the possessors of wealth, by liberal contributions to every object that can benefit humanity, relieve suffering, prolong and preserve human life, improve education, aid scientific investigation and promote a higher development of art, that they regard their wealth in a great degree as in the nature of a trust, to be used by them for the benefit of humanity and the elevation of the masses.

Happily we have abundant proof that this view has been adopted by many in this city.

The foundation of the Astor Library and the Cooper Institute are a corroboration of this statement as regards the past. The splendid gift to the College of Physicians and Surgeons by Mr. W. H. Vanderbilt, the munificent endowment of the New York Cancer Hospital by Mr. John Jacob Astor, and the generous and liberal contribution of Mr. Andrew Carnegie for a pathological laboratory in the Bellevue Hospital Medical College, are recent evidences of the correctness of my assertion.

Such noble examples are sure to be emulated by many others in the future.

The wonderful material growth and development of this country is unparalleled by anything in the history of the past, and they are certain to go on in even more rapid strides for years to come. Its educational and scientific institutions will be placed on a corresponding plane, as compared with other parts of the world, with its industrial, its financial, and its political relations.

There is another point worthy of remark. Men of wealth, in common with other men of intelligence, like those devoted to literature and science, have a desire to be remembered after death. They have a dread of having their names and the record of their lives pass into utter forgetfulness or oblivion. To avoid this, the resting places of the dead are everywhere crowded with cenotaphs and memorials, and in this country especially,

by the erection of some of the most expensive monuments and mausoleums of modern times. They crowd each other in some of our cemeteries to such a degree that they lose all their individuality by their multiplicity; and the names which they are intended to keep alive are forgotten in the comments and criticisms as to the comparative merits of the architect or stone-cutter who has erected them. The frequent question asked is, "How much did it cost?" and the only suggestion is that of vulgar wealth. "Yet all here," to quote from quaint old Sir Thomas Brown, "are but Babel vanities. Time sadly overcometh all things, while her sister Oblivion reclineth somniferous, making puzzles of titanic erections and turning old glories into dreams."

The only lasting monument a man can build for himself is the reputation he makes during life, and the memory of the benefits which he has, in some form or other, conferred on those who live after him.

" But the good deed through the ages,  
Living in historic pages,  
Ever gleams and grows immortal,  
Unconsumed by moth or rust."

From all these considerations I feel justified in expressing the belief that the ideal of the future of the Academy which I have given, will at no remote period prove to be history. I hope to live to see it well begun, and I have the strong conviction that some now present will see it in full accomplishment. Some man of wealth, fully comprehending the importance of this Academy, not merely to the profession, but still more to the public, will esteem it a privilege to have his name prefixed to our new hall by furnishing the requisite sum to build it and perfectly equip and support it; others will contribute the necessary amount to give their names to each of the special museums that I have mentioned, and others will place their names on an alcove in the library.

I here crave indulgence for one remark, the only one personal to myself:

I trust this evening will end, on my part, all official connection with any medical societies. The remainder of my life, except the time necessary for bread-winning, will be devoted to putting on record the results of more than forty years of study, observation, and experience, with the hope that this may be of some value to the younger men of the profession, and to doing all in my power to urge forward that future of our Academy which I have anticipated.

I have but a few words to add before introducing my successor.

Some years ago, when elected to a similar honor in another society, I remarked: "Scientific societies seem to be governed in their selection of office-bearers by one of two principles. One is to confer honor on those who, by their contributions to literature and science, have won a right to it. The other is to select such as will most efficiently perform the duties which pertain to the office."

In the election of my successor, the Academy has most happily combined both of these principles. His literary and scientific work have won for him an enviable fame and high distinction equally in this country and in Europe. His ability as a presiding and executive officer has already been successfully tested by his former service as President of the New York County Medical Society, and of the Medical Society of the State of New York. Thus he begins his career with a prestige which is a promise of great success.

I now have the great pleasure of presenting to him the "loving cup," on which his name has already been engraved, and which is to be transmitted to his successors in turn. It is ornamented with the symbol of friendship and love, and on it is the sentiment engraved, "May peace and love be multiplied unto us."

Some years ago the phrase was very current in the political world, "let us have peace." It is as wise a sentiment for the medical as for the political world. I sincerely hope that my successor will never have to qualify this with the paradoxical appendix, "Let us have peace, even if we have to fight for it."

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CONSTITUTION, BY-LAWS,  
ACT OF INCORPORATION,  
LIST OF FELLOWS,  
AND  
CONTRIBUTORS TO THE BUILDING FUND,  
OF THE  
NEW YORK  
ACADEMY OF MEDICINE.  
INSTITUTED 1847.



NEW YORK:  
PRINTED FOR THE ACADEMY.  
AUGUST, 1876.

1. The first part of the document is a list of names and dates.

## CONSTITUTION.

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### ARTICLE I.

THIS Association shall be called the NEW YORK ACADEMY OF MEDICINE, and shall be composed of Resident, Non-Resident, Corresponding, and Honorary Fellows.

### ARTICLE II.

The objects of the Academy shall be :

*First.* The cultivation of the Science of Medicine.

*Second.* The advancement of the character and honor of the Profession.

*Third.* The elevation of the standard of Medical Education.

*Fourth.* The promotion of the Public Health.

### ARTICLE III.

1. Each candidate for Resident Fellowship must have been a graduate or licentiate in medicine residing in this city and county, or in either of the counties of this State thereunto adjoining, for three years.

2. Surgeons of the Army and Navy may be admitted as Non-Resident Fellows in the same manner as Resident Fellows.

3. Resident Fellows removing permanently from the city or vicinity, may become Non-Resident Fellows by nomination and vote of the Academy.



## ARTICLE IV.

1. Nominations for Corresponding and Honorary Fellows must be made by three Fellows, and have the usual reference.

2. Corresponding Fellows must be men of eminence, actively engaged in the cultivation of Medical Science, and their number shall be limited to one hundred.

3. Honorary Fellows must be citizens of the United States, and have been long distinguished in their profession. Their number shall be limited to fifty.

## ARTICLE V.

SECTION 1. There shall be a President, three Vice-Presidents, a Recording Secretary, a Corresponding Secretary, a Treasurer, and five Trustees.

These officers, together with the chairmen of the standing committees, shall constitute a Council. There shall also be a Librarian, a Statistical and an Assistant Secretary, the latter to be nominated by the Recording Secretary, and all to be appointed by the Council.

SEC. 2. The President shall be elected for the term of two years; the Vice-Presidents for the term of three years, one retiring and one being elected each year.

The Recording and Corresponding Secretaries, and the Treasurer, shall be elected for the term of three years; the Statistical Secretary and the Trustees for the term of five years (the former by the Council), one Trustee being elected and one retiring each year.

## ARTICLE VI.

SECTION 1. The following Standing Committees shall be elected for the term of five years by ballot, and shall consist of five members each, one member for each committee being elected and one retiring yearly; and they shall severally perform such duties as may be assigned to them:

1. A Committee on Admissions. 2. A Committee on

Medical Ethics. 3. A Committee on Medical Education. 4. A Committee on Library.

SEC. 2. The Academy shall be divided into six sections, viz.: Section 1, Anatomy, Physiology and Pathology. Section 2, Surgery. Section 3, Theory and Practice of Medicine. Section 4, Obstetrics and Diseases of Women and Children. Section 5, Chemistry, Pharmacy, Materia Medica, Therapeutics, and Botany. Section 6, Public Health, Legal Medicine, and Medical and Vital Statistics.

#### ARTICLE VII.

SECTION 1. Every Fellow shall be furnished with a duly-authenticated certificate of fellowship, which may be revoked for cause; and in case of refusal to surrender the same, the Academy may publish said revocation in the public journals.

SEC. 2. Any Fellow, having complied with the requirements of the Constitution and By-Laws, may resign his fellowship, by presenting at a stated meeting a communication in writing to that effect.

SEC. 3. No resignation shall be valid until accepted by the Academy.

#### ARTICLE VIII.

The Academy reserves the right of punishing violations of its regulations, or of its code of Medical Ethics, by reprimand, suspension, or expulsion; and will recognize no Fellow as a regular practitioner who has been expelled.

#### ARTICLE IX.

No part of this Constitution shall be altered, except at a stated meeting, subsequent to one at which a proposition to that effect shall have been made in writing, and then only by a vote of three-fourths of the Resident Fellows present.

## BY-LAWS.

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### I. MEETINGS AND NOMINATIONS.

**SECTION 1.** The Stated Meetings of the Academy shall be held on the first and third Thursdays of every month, at 8 o'clock P. M., except when the regular day is the first day of January or the fourth day of July.

**SEC. 2.** There shall be a recess from and after the first Thursday in July to the third Thursday in September of each year.

**SEC. 3.** The Anniversary Discourse shall be delivered in November.

**SEC. 4.** At the first stated meeting in December all annual reports, and all nominations for the officers to be elected by the Academy shall be made.

**SEC. 5.** The Elections shall be held at the first stated meeting in January, except under extraordinary circumstances, when special provision may be made.

**SEC. 6.** Special meetings may be called at any time by the President, upon the requisition in writing, of any ten Resident Fellows.

**SEC. 7.** At all meetings, twenty-one Resident Fellows shall be necessary to constitute a quorum.

### II. THE PRESIDENT

Shall preside over all meetings, regulate all debates, call for reports, summon extraordinary meetings on urgent occa

sions, sign all diplomas, letters-testimonial, and other documents requiring his signature, appoint all committees not otherwise provided for, announce the result of all votes, introduce all Corresponding, Non-Resident, and Honorary Fellows, or distinguished members of the profession who may be present, designate one or more Fellows to prepare suitable memoirs of deceased Fellows, and be, *ex officio*, a member of all Standing Committees, and of the Board of Trustees.

### III. VICE-PRESIDENTS.

The Vice-Presidents shall assist the President in the discharge of his duties, and in his absence preside in the order of rank.

### IV. RECORDING SECRETARY.

The Recording Secretary shall keep minutes of the proceeding of all meetings, notify officers and members of committees of their appointment and the duties required of them, sign diplomas, and certify to all official acts requiring certificates either in connection with or independently of the President, as the case may be; attest and affix the common seal to all diplomas, letters-testimonial, and other documents requiring the seal of the Academy and signature of the President; transmit to the Committee on Admissions all nominations for fellowship within one week after each stated meeting; receive the signatures and initiation-fees of newly-admitted Fellows, and pay the moneys thus received over to the Treasurer; be, *ex officio*, a member of the standing committees and of the Board of Trustees; and transact such other business in his department as may be ordered by the Academy.

### V. ASSISTANT SECRETARY.

SECTION 1. The Assistant Secretary shall keep a list of the Resident Fellows; issue notice of meetings, which shall be mailed on Saturday previous to the time of meeting; for special meetings three days' notice must be given, when practicable; assist the Recording Secretary in the discharge of his duties, and in his absence perform them.



SEC. 2. He shall keep a Register in which the signatures of the Fellows in attendance at each meeting shall be entered; and as soon as a quorum is thus ascertained to be present, notify the President.

#### VI. CORRESPONDING SECRETARY.

The Corresponding Secretary shall take charge of, and conduct, the correspondence of the Academy. He shall report the death of each Corresponding and Honorary Fellow, and prepare a Memoir to be read before the Academy.

#### VII. STATISTICAL SECRETARY.

The Statistical Secretary shall keep a tabular record of the names of every former and present Resident Fellow of the Academy, with their places and dates of birth, education, and graduation; their social condition, the number, names, and dates of birth and death of the family of each; also the date, place, and cause of death of each Fellow, with such other circumstances as will fully illustrate the vital statistics of the Academy. He shall report to the Academy, as early as practicable thereafter, the decease of each Fellow, with such facts relating to his life and death as may be obtainable.

#### VIII. TREASURER.

The Treasurer shall receive all moneys and funds accruing to the Academy, and shall retain the same until otherwise appropriated; he shall pay all bills or sums of money directed by the Academy or Council, and none others; keep a correct account of all moneys received and expended; have power to employ a person to collect the dues and assessments; give a statement of the funds of the Academy to the Council or Academy, have his books ready for their inspection whenever they may require it; and deliver up, when called upon by the Council or Academy, all moneys, bonds, papers, books, etc., belonging to the Academy, to his successor in office, or to any other person especially appointed to receive them. He shall send a bill for annual dues to each member by mail, directly

after the annual election. He shall report to the Trustees every February the names of all Fellows who are two or more years in arrears of dues.

#### IX. LIBRARY COMMITTEE.

SECTION 1. The Library Committee shall have a general supervision of the Library of the Academy, and shall report upon its condition annually at the first stated meeting in December, at which time they shall furnish to the Academy a statement of the amount necessary to meet the estimated wants of the Library during the ensuing year, when such an appropriation, based upon such estimate, shall be made by the Academy as may be deemed compatible with the state of its funds. The expenditure of such funds shall be made by the Librarian, under the direction of the Library Committee.

SEC. 2. The Librarian shall be nominated by the Library Committee, and shall be a member of that Committee.

SEC. 3. The Librarian shall have charge of all the books, manuscripts, anatomical or pathological specimens, apparatus, instruments, portraits, medals, coins, and other scientific property of the Academy, and shall attend to their preservation, arrangement, and cataloguing. He shall fix to each donation the name of the donor. He may sell the publications of the Academy at the price affixed by the Council, and shall pay the proceeds half-yearly to the Treasurer. He, or his Assistant, shall attend in the Library from 9 A. M. to 12 M., and from 1 to 4 P. M., daily, Sunday excepted, and during the months of November, December, January, February, and March, from 7 to 10 P. M.

SEC. 4. It shall be the duty of the Librarian, as soon as practicable after the receipt of the professional journals and new publications generally, to make such arrangements as shall enable the Fellows to consult the same in the hall of the Academy, under such regulations as the Library Committee shall adopt, and to report at each stated meeting of the Academy, such donations to the Library as may have been received since the preceding meeting.



SEC. 5. No books shall be taken from the building of the Academy.

#### X. BOARDS AND COMMITTEES.

SECTION 1. The Council, the Trustees, the Standing Committees, and the Sections, shall meet within two weeks after the annual election to organize, and as often thereafter as they please, or as may be necessary, to transact the business referred to them by the Academy, and keep regular minutes of their proceedings, which shall be recorded in suitable books provided for the purpose.

SEC. 2. They shall, in addition to such duties as are hereinafter assigned to them, respectively consider all matters particularly referred to them, and report thereon.

SEC. 3. When any member of a Standing Committee, the Council, or the Trustees, shall be absent four consecutive stated meetings, without satisfactory cause to said committee, etc., the same shall be reported to the President, who shall declare his seat vacant.

SEC. 4. If an officer shall fail to discharge his duties to the satisfaction of the Academy, he may be dismissed from his office by a two-thirds vote; but no motion for dismissal shall be acted upon until the next stated meeting; prior to which meeting the Recording Secretary shall notify the alleged delinquent of such motion.

SEC. 5. Every member of a committee, or Fellow, having funds or property belonging to the Academy, shall give up the same on demand, to the person authorized to receive it.

#### XI. THE COUNCIL.

The Council shall supervise the general affairs and interests of the Academy; they shall provide suitable accommodations for its meetings, for its movable property, and for its business transactions; they shall estimate for the annual assessment, when at any time an increase thereof may be necessary; they shall annually, in October, audit the financial accounts, and oftener if deemed requisite; they shall authenticate and authorize the payment of all bills against the Acad-



emy not exceeding fifty dollars; they shall confer with the Trustees, the Treasurer, and other officers, and with the standing committees through the chairman of each, in reference to their respective functions and business relations; they shall appoint the Librarian, the Assistant and Statistical Secretaries; they shall nominate such Fellows as are to be appointed to deliver series of discourses or lectures on scientific subjects before the Academy, and also a Fellow to deliver the Anniversary Discourse; they shall determine the propriety of the reading of any paper offered by any person not a Fellow of the Academy; they shall select and recommend to the Academy for publication from the archives such essays, memoirs, or reports, as are to appear in the printed Transactions. All papers published in the Transactions shall be by a two-thirds vote of the members present. They shall fix the prices of all publications offered for sale; they shall, by a two-thirds vote, fill all vacancies until the next annual election, except of the President and Vice-Presidents, which shall be filled by the Academy; they shall appoint all delegates to other societies when admissible; they shall superintend the printing and publication of all papers and volumes ordered by the Academy; and they shall once a year report in full to the Academy. A majority of the Council shall be necessary to constitute a quorum.

#### XII. TRUSTEES.

The Trustees shall have charge of the Building Fund and its accumulations by interest, donation, or bequest; and of all the other invested funds of the Academy, and of such real estate as may at any time come into the possession of the Academy. It shall be their duty, under the sanction of the Council, safely to invest, to collect the interest on, and hold the securities for, any moneys of the Academy intrusted to their care; to report the modes of investment and the condition of the funds or property aforesaid to the Council when required, and annually to the Academy. They shall ascertain, at each February meeting, the names of all Fellows who are two years in arrears of dues, and shall notify all such of

the fact, and shall, within one year, report to the Recording Secretary the names of all persons who have forfeited their Fellowship.

#### XIII. COMMITTEE ON ADMISSIONS.

SECTION 1. Each candidate for Resident Fellowship must be proposed in writing by three Fellows personally acquainted with him, and may be admitted at a meeting subsequent to his recommendation by the committee. The recommendation of Corresponding, Honorary, and Non-Resident Fellowships from the Army and Navy, must be at least one month before the Academy before the candidate can be admitted.

SEC. 2. Admission to Fellowship must be by a three-fourths vote of the members present at a stated meeting.

SEC. 3. The Committee on Admissions, upon receiving from the Recording Secretary the names of the candidates proposed for Fellowship with their professional credentials, shall make due inquiry concerning them, and all information thus obtained shall be confidential; they shall report within three months such as may be deemed worthy of admission; which report, if for Resident Fellowship, shall specify the source whence the nominees derived their diploma or license to practice, with the dates thereof; and should this committee fail to report within the time specified upon any nomination submitted to them, any Fellow having made such a nomination may renew the same directly to the Academy, and a vote shall be taken upon it; in this case, however, the affirmative vote of four-fifths of the Fellows present, as ascertained by ballot, shall be requisite to insure an admission; and on the question being put, it shall be distinctly stated that the nomination has not been approved by the committee.

#### XIV. COMMITTEE ON MEDICAL ETHICS.

SECTION 1. The Committee on Medical Ethics shall hear all complaints of violation of medical ethics on the part of any Fellow, and decide all questions of medical ethics submitted to them by the Academy. They shall also notify to



appear before them, any Fellow of the Academy against whom any charge may have been preferred, and furnish him with a copy of the same; his accuser being also cited to appear, the committee shall proceed to take testimony and hear the defense, reserving their decision to be reported to the Academy at the next stated meeting, when their action may be affirmed by a majority of the Fellows present; but the vote of three-fourths shall be required to reverse the decision of the committee.

SEC. 2. Every charge against a fellow of the Academy shall be made by a Fellow, and addressed to the Recording Secretary, under a sealed cover, with the words, "Charge against a Fellow," written upon it. The reception of such paper shall be announced to the Academy by the Secretary, who, after designating it by a number, shall hand the same over to the Committee on Medical Ethics.

SEC. 3. It shall be deemed a chargeable offense to countenance, encourage, or patronize—by advertising, giving certificates, or in any other way whatever—an irregular practitioner, or the proprietor, or vender, of any nostrum, patent, or quack medicine; or to commit any act which unfavorably affects the character of the Medical Profession.

SEC. 4. A three-fourths vote of the Fellows present shall be necessary to expel a member.

SEC. 5. All questions of Ethics in other respects shall, as far as applicable, be adjudged in accordance with the Code of Ethics promulgated by the American Medical Association and adopted by the Academy.

#### XV. COMMITTEE ON MEDICAL EDUCATION.

The Committee on Medical Education shall have cognizance of the systems of medical instruction, private and public, in this city and State, as compared with such as are elsewhere in use. They shall recommend such improvements in office-training and office-examinations, in text-books, in reading and in practical studies proper for the student, and in the public courses, theoretical and practical, at the colleges and

hospitals, as may seem to them in keeping with the advances of medical knowledge and the exigencies of the profession. They shall notice any evasion or infringement of the laws of this State that may come to their knowledge in reference to the granting of degrees. They shall make, in other respects, such suggestions as seem to them worthy of attention for rendering our systems of medical education thorough, efficient, and satisfactory. They shall report at least once a year to the Academy.

#### XVI. SECTIONS.

SECTION 1. Every newly-admitted Resident Fellow shall be assigned to a Section by the President, subject to a change by the Academy.

SEC. 2. The Sections shall bring before the Academy at its stated meetings, or as otherwise ordered, such matters as pertain to the several departments respectively assigned to them, as subjects for discussion, or other action. They shall severally examine and report on all papers, documents, instruments, apparatus, etc., submitted to them, and give a brief abstract of cases reported in the Sections. They shall severally appoint each year two or more Fellows to read original papers before the Academy, also present two topics for discussion.

#### XVII. ELECTIONS.

SECTION I. At the stated meeting previous to every annual election the President shall appoint two Fellows, who, together with the Assistant Secretary, shall constitute a Board of Inspectors, to receive the ballots, and the latter of whom shall record the names of all the voters. The poll shall be opened immediately after the reading of the minutes, on the evening of the election, and shall be kept open one hour, at the end of which time it shall be declared closed, and no votes shall thereafter be received. All the officers voted for shall be on one ballot. The Recording Secretary shall cause the names of all the nominees for each office to be printed on slips, two copies of which, together with a copy of this by-



law, shall be sent to each Fellow with the notice of the election. No Fellow whose annual dues remain unpaid shall be entitled to a vote.

SEC. 2. At the close of the poll the Inspectors shall immediately proceed to canvass the votes, and if no choice shall have been made in any one or more of the offices, a new balloting for such officers as are still to be elected shall forthwith take place, the poll for which shall be kept open until all present, who may desire it, have voted, but not longer than thirty minutes. At the second and each succeeding ballot, the name of the candidate having the fewest votes shall be withdrawn.

SEC. 3. All the officers shall be elected by ballot, and by a majority vote of the Fellows present.

SEC. 4. Ballots folded in each other, blank votes, and votes cast for a Fellow not in regular nomination, shall be discarded.

#### XVIII. FUNDS.

SECTION 1. The Securities, Investments, and Funds of the Academy shall not be disposed of, or transferred, in whole, or in part, unless by approval of the Council and by a two-thirds vote of the Academy, and after notice given at a previous meeting; but bills, for current or contingent expenses, may be passed by a majority, at any stated meeting, without previous notice.

SEC. 2. No Loan of the Funds shall be made except on United States or New York State Stocks, or bond and mortgage. No Fellow, whose fellowship has been vacated, shall have a right, title, or claim to any portion of the funds or property of the Academy. No money shall be borrowed by the Academy, except on a vote of three-fourths of the Fellows present; and after one month's notice.

#### XIX. DUES AND ASSESSMENTS.

SECTION 1. Each Resident Fellow, on admission, shall pay an initiation-fee of five dollars.

SEC. 2. There shall be an annual assessment of TEN dollars, which shall be payable before the first day of March in each year. Any other assessments made by order of the Academy shall be payable within two months after the same is ordered.

SEC. 3. Any Fellow neglecting to pay his dues for two or more years shall forfeit his Fellowship, provided he shall have received one month's notice thereof from the Trustees. He shall then be summoned by the Recording Secretary to appear before the Academy after one week's notice, to show cause why his name should not be stricken from the roll of Fellows for the non-payment of dues; and failing to do so, it shall be submitted to a vote, and if sustained, the President shall then declare his Fellowship forfeited, and his name be erased from the roll, and the same be recorded on the Minutes.

#### XX. SIGNING THE CONSTITUTION AND BY-LAWS.

SECTION 1. Every duly-admitted Resident Fellow shall affix his signature to the Constitution and By-Laws within two months after his election; and in default thereof, said election shall be deemed void, unless a satisfactory excuse be given; nevertheless, he may be renominated and reelected.

SEC. 2. No one admitted a Resident Fellow shall be entitled to the rights and privileges of fellowship until he shall have paid his initiation-fee and signed the Constitution and By-Laws.

#### XXI. INVITED GUESTS.

SECTION 1. Any resident Fellow may invite his professional friends to attend the meetings of the Academy; and all Fellows not resident, distinguished physicians, or invited guests, present at a meeting, shall be introduced to the President, and by him to the Academy, and their names entered on the Minutes.

SEC. 2. Any Fellow may, through the Chair, call on other Fellows, or upon invited guests, for the expression of their views and opinions on subjects under consideration.



XXII. MANUSCRIPT ESSAYS AND PAPERS.

SECTION 1. A copy of every Discourse, Memoir, or Medical Paper, read before the Academy, shall be kept in its archives by the Librarian.

SEC. 2. All memoirs of deceased Fellows shall be written on paper of uniform size and quality, furnished by the Council, and shall be bound in successive volumes for future reference.

SEC. 3. All papers read before the Academy shall be referred to the Council. All matters for publication emanating from the Sections shall have the same reference.

SEC. 4. An author may publish his paper elsewhere than in the "Transactions" of the Academy, as having been read before the Academy; but in that case, no extra copies will be afforded him at the expense of the Academy, should the Council also decide to publish the same.

SEC. 5. Of each paper published at length, by the Academy alone, thirty extra copies may be printed for the author at the expense of the Academy.

SEC. 6. To secure the prompt publication of papers, a copy of each shall be handed to the Secretary immediately, or within five days after it is read. A failure to comply with this requirement may prevent the publication of the paper *in extenso* by the Academy, though the Council may at its option decide to print an abstract of it. The Secretary shall remind the reader of the paper of the preceding regulation before the adjournment of the meeting at which it was read.

SEC. 7. Each Resident Fellow shall be entitled to one copy of all the publications of the Academy printed during the time for which his dues are paid; each Corresponding and Honorary Fellow to one copy of the Transactions.

XXIII. ANNUAL REPORTS.

SECTION 1. The following departments of the Academy shall present full reports annually of their doings to the Council at their meeting in November of each year, written on uniform paper, to be furnished by the Council:



1. Treasurer, audited.
2. Trustees,        "
3. Recording Secretary.
4. Corresponding Secretary.
5. Statistical        "
6. Committee on Library.
7.        "        " Education.
8.        "        " Admissions.
9.        "        " Ethics.
10. The Several Sections.

All shall be signed by their respective officers, and with the report of the Council, shall be read by the Recording Secretary or otherwise, at the first meeting in December of each year.

Sec. 2. All special committees shall write their reports on uniform paper as above, and which shall be bound into a volume, so soon as sufficient shall have been accumulated, and placed in the Archives of the Academy.

#### XXIV. RULES OF ORDER.

Section 1. The following shall be the order of business at the stated meetings :

1. Reading the Minutes.
2. At the First Meeting in December, the Annual Reports and Nominations of Officers.  
At the First Meeting in January, the Annual Election.
3. Report of Committee on Admissions.
4. Admission of new Fellows.
5. Reports of Sections in their order.
6. Reports by leave.
7. Reception of Professional and Scientific Intelligence.
8. Reading of Papers and Discourses.
9. Appointed Debates and Discussions.
10. Unfinished Business.
11. New Business.

Sec. 2. When a question is under debate, no motion shall be received, but to adjourn; to lay on the table; for the previous question; to postpone; to refer; or to amend: which several motions shall have precedence in the order in which

they are here arranged. The first three shall be decided without debate.

SEC. 3. When a blank is to be filled, the question shall be first taken on the highest number, the greatest sum, or longest time proposed.

SEC. 4. Any Fellow may call for a division of a question when the sense will admit of it.

SEC. 5. The yeas and nays on any question, when called for by five Fellows present, shall be taken without debate and recorded on the Minutes.

SEC. 6. After any question has been decided, except one of indefinite postponement, any two Fellows who voted in the majority, may at the same or next stated meeting, move for a reconsideration thereof; without which no discussion shall be allowed.

SEC. 7. Every Fellow shall have the privilege of speaking once on any question under consideration; but not oftener, unless by permission of the Academy.

SEC. 8. Any Fellow, called to order while speaking, shall take his seat, and the debate be suspended until the point of order is settled.

SEC. 9. All questions of order shall be decided by the Chair, subject to an appeal, which shall be determined by vote, without debate.

SEC. 10. No motion shall be made while a Fellow is speaking; and in all cases the mover must rise and address the Chair.

SEC. 11. All resolutions and amendments shall be offered in writing, when required.

SEC. 12. All questions of order, not provided for by these rules, shall be determined by parliamentary usage.

#### XXV. ALTERATIONS OF BY-LAWS.

These By-Laws may be suspended by a three-fourths vote at a stated meeting. They may be repealed or amended by a similar vote, provided notice of the same has been given in writing at a previous stated meeting.

## AN ACT

TO INCORPORATE THE NEW YORK ACADEMY OF MEDICINE,

*Passed June 23, 1851.*

THE people of the State of New York, represented in Senate and Assembly, do enact as follows :

SECTION 1. J. Kearney Rodgers, James Anderson, Galen Carter, Willard Parker, John H. Griscom, Edward L. Beadle, Isaac Wood, James O. Pond, and John G. Adams, and such other persons as are now associated as the New York Academy of Medicine, or may hereafter become associated with them, are hereby constituted a body corporate, by the name of

“THE NEW YORK ACADEMY OF MEDICINE,”

for the purpose of promoting the advancement of Medical Science, by such means as to them shall appear expedient and proper.

SEC. 2. The said Corporation shall have power to make and adopt a Constitution and By-Laws, rules and regulations for the admission, suspension, and expulsion of its members, and their government; the election of its officers, and define their duties; and for the safe keeping and protection of its property and funds, and, from time to time, to alter or repeal such Constitution, By-Laws, rules, and regulations. The

present officers shall hold their respective offices until others shall be chosen in their places.

Sec. 3. The said Corporation may purchase and hold any real or personal estate, the annual income of which shall not exceed five thousand dollars.

Sec. 4. The said Corporation shall possess the general powers, and be subject to the general restrictions and liabilities prescribed in the third title of the eighteenth chapter of the first part of the Revised Statutes.

Sec. 5. The corporators, hereby incorporated, are authorized to appoint five\* delegates, to represent them in the State Medical Society, with all the powers and privileges which delegates for the respective Medical Colleges of this State possess.

Sec. 6. The Legislature may at any time alter or repeal this act.

*State of New York, Secretary's Office.*

I certify, that I have compared the foregoing with [L. s.] an original law on file in this office, and that the same is a correct transcript therefrom, and of the whole of said original.

Given under my hand and seal of office, at the city of Albany, this twenty-eighth day of June, one thousand eight hundred and fifty-one.

A. G. JOHNSON, *Dep. Sec. of State.*

\* Altered from *one* by Act of June 4, 1853.

# NEW YORK ACADEMY OF MEDICINE.

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## OFFICERS FOR 1876.

### *President.*

SAMUEL S. PURPLE, M. D.

### *Vice-Presidents.*

JOHN C. DALTON, M. D.,  
GOUVERNEUR M. SMITH, M. D.,  
FORDYCE BARKER, M. D.

### *Recording Secretary.*

WILLIAM T. WHITE, M. D.

### *Corresponding Secretary.*

JOHN G. ADAMS, M. D.

### *Treasurer.*

JAMES O. POND, M. D.

### *Trustees.*

ISAAC E. TAYLOR, M. D.,  
EDMUND R. PEASLEE, M. D.,  
JAMES L. BANKS, M. D.,  
AUSTIN FLINT, M. D.,  
SAMUEL T. HUBBARD, M. D.

### *Librarian.*

JOHN H. HINTON, M. D.

### *Assistant Secretary.*

HORACE T. HANKS, M. D.

### *Sectional Secretary.*

ALLAN McL. HAMILTON, M. D.

## COMMITTEES FOR 1876.

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### *Committee on Admissions.*

JOSEPH E. JANVRIN, M. D.,	EDWARD H. JANES, M. D.,
ELLSWORTH ELIOT, M. D.,	MARK BLUMENTHAL, M. D.,
TIMOTHY M. CHEESMAN, M. D.	

### *Committee on Medical Ethics.*

JOHN O. PETERS, M. D.,	THOMAS O. FINNELL, M. D.,
OLIVER WHITE, M. D.,	TIMOTHY M. CHEESMAN, M. D.,
MOREAU MORRIS, M. D.	

### *Committee on Medical Education.*

FREDERICK A. BURRALL, M. D.,	JAMES R. LEAMING, M. D.,
ALFRED C. POST, M. D.,	EDMUND R. PEASLEE, M. D.,
CHARLES C. LEE, M. D.	

### *Committee on Library.*

CHARLES M. ALLIN, M. D.,	JOHN H. HINTON, M. D.,
JAMES R. LEAMING, M. D.,	E. DARWIN HUDSON, JR., M. D.,
GEORGE BAYLES, M. D.	

### *Committee on Ways and Means.*

JAMES ANDERSON, M. D.,	JOHN G. ADAMS, M. D.,
WILLARD PARKER, M. D.,	STEPHEN SMITH, M. D.,
SAMUEL T. HUBBARD, M. D.,	SAMUEL S. PURPLE, M. D.,
JARED LINSLEY, M. D.,	GOUVERNEUR M. SMITH, M. D.

### *Committee on Building.*

EDMUND R. PEASLEE, M. D.,	SAMUEL T. HUBBARD, M. D.
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LIST OF  
PRESIDENTS OF THE ACADEMY,  
FROM ITS ORGANIZATION.

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**ELECTED.**

- 1847. JOHN STEARNS, M. D.
- 1848. JOHN W. FRANCIS, M. D., LL. D.
- 1849. VALENTINE MOTT, M. D., LL. D.
- 1850. ISAAC WOOD, M. D.
- 1851. ALEXANDER H. STEVENS, M. D., LL. D.
- 1852. THOMAS COCK, M. D.
- 1853. ISAAC WOOD, M. D.
- 1854. JOSEPH M. SMITH, M. D.
- 1855. JOHN W. FRANCIS, M. D., LL. D.
- 1856. WILLARD PARKER, M. D.
- 1857. VALENTINE MOTT, M. D., LL. D.
- 1858. JOHN P. BATCHELDER, M. D.
- 1859. JOHN WATSON, M. D.
- 1861. JAMES ANDERSON, M. D.
- 1867. ALFRED C. POST, M. D., LL. D.
- 1869. HENRY D. BULKLEY, M. D.
- 1871. EDMUND R. PEASLEE, M. D., LL. D.
- 1873. AUSTIN FLINT, M. D.
- 1875. SAMUEL S. PURPLE, M. D.

LIST OF  
VICE-PRESIDENTS OF THE ACADEMY.

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**ELECTED.**

1847. FRANCIS U. JOHNSTON, M. D.  
 1847. THOMAS COCK, M. D.  
 1847. JOHN B. BECK, M. D.  
 1847. JOHN W. FRANCIS, M. D.  
 1848. JOHN K. RODGERS, M. D.  
 1848. WILLIAM W. MINER, M. D.  
 1849. ISAAC WOOD, M. D.  
 1849. JAMES R. MANLEY, M. D.  
 1849. GALEN CARTER, M. D.  
 1850. JOSEPH M. SMITH, M. D.  
 1850. JAMES C. BLISS, M. D.  
 1850. ALFRED C. POST, M. D.  
 1851. JOHN P. BATCHELDER, M. D.  
 1852. JAMES ANDERSON, M. D.  
 1852. GURDON BUCK, JR., M. D.  
 1853. EDWARD L. BEADLE, M. D.  
 1853. F. CAMPBELL STEWART, M. D.  
 1853. WILLIAM DETMOLD, M. D.  
 1853. WILLARD PARKER, M. D.  
 1854. JOHN H. GRISCOM, M. D.  
 1856. JOHN WATSON, M. D.

**ELECTED.**

1856. JACKSON BOLTON, M. D.  
 1857. JAMES R. WOOD, M. D.  
 1857. B. FORDYCE BARKER, M. D.  
 1858. CHARLES E. ISAACS, M. D.  
 1858. WM. H. VAN BUREN, M. D.  
 1858. S. CONANT FOSTER, M. D.  
 1859. JOEL FOSTER, M. D.  
 1860. MOSES D. VAN PELT, M. D.  
 1862. HENRY D. BULKLEY, M. D.  
 1863. ALFRED UNDERHILL, M. D.  
 1866. OLIVER WHITE, M. D.  
 1867. ISAAC E. TAYLOR, M. D.  
 1868. EDMUND R. PEASLEE, M. D.  
 1868. JOSEPH C. HUTCHISON, M. D.  
 1869. WILLIAM C. ROBERTS, M. D.  
 1871. AUSTIN FLINT, M. D.  
 1872. SAMUEL S. PURPLE, M. D.  
 1873. SAMUEL T. HUBBARD, M. D.  
 1874. JOHN C. DALTON, M. D.  
 1875. GOUVERNEUR M. SMITH, M. D.  
 1876. FORDYCE BARKER, M. D.

LIST OF  
ORATORS OF THE ACADEMY.

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1847. JOHN W. FRANCIS, M. D., LL. D.  
1848. JAMES R. MANLEY, M. D.  
1849. ALFRED C. POST, M. D., LL. D.  
1850. JOSEPH M. SMITH, M. D.  
1851. F. CAMPBELL STEWART, M. D.  
1852. F. CAMPBELL STEWART, M. D.  
1853. JOHN A. SWETT, M. D.  
1854. JOHN H. GRISCOM, M. D.  
1855. JOHN WATSON, M. D.  
1856. WILLIAM DETMOLD, M. D.  
1857. J. MARION SIMS, M. D.  
1858. EDMUND R. PEASLEE, M. D., LL. D.  
1859. WILLIAM C. ROBERTS, M. D.  
1860. JOHN WATSON, M. D.  
1861. S. CONANT FOSTER, M. D.  
1862. S. CONANT FOSTER, M. D.  
1863. JOHN W. DRAPER, M. D., LL. D.  
1866. JOHN ORDRONAU, M. D.  
1867. STEPHEN SMITH, M. D.  
1868. AUSTIN FLINT, M. D.  
1869. GOUVERNEUR M. SMITH, M. D.  
1872. EDWARD S. DUNSTER, M. D.  
1873. JOHN C. DALTON, M. D.  
1874. D. R. ST. JOHN ROOSA, M. D.  
1875. F. DARWIN HUDSON, JR., M. D.

FELLOWS  
OF THE  
NEW YORK ACADEMY OF MEDICINE.  
*INSTITUTED 1847.*

UNA FIDES ALTARE COMMUNE.

*EXPLANATION OF ABBREVIATIONS USED:*

P. President.	T. Treasurer.
V. P. Vice-President.	L. Librarian.
R. S. Recording Secretary.	A. S. Assistant Recording Secretary.
C. S. Corresponding Secretary.	Trust. Trustee.

 The figures following the words *Trans.*, *Bul.*, and *Pro.* denote the number of papers which have been contributed by the Fellows, and printed in the volumes of the "Transactions," "Bulletin," and "Proceedings," already published by the Academy.

Those marked thus \* have deceased.

AUGUST, 1876.

**ELECTED.**

Original.	ADAMS, JOHN G., M. D., R. S. 1850-'51; Trust. 1852. C. S., 1849, 1855, 1862, and now in office. <i>Pro.</i> 1.
1859.	AGNEW, CORNELIUS R., M. D., Clinical Professor of Diseases of the Eye and Ear in the College of Physicians and Surgeons, N. Y.; Surgeon to the Manhattan Eye and Ear Hospital, N. Y.; Consulting Surgeon to the Brooklyn Eye and Ear Hospital. <i>Bul.</i> 2.
1875.	ALLIN, CHARLES M., M. D.; Surgeon to the New York Eye and Ear Infirmary; Surgeon to the New York Hospital.
Original.	ANDERSON, JAMES, M. D., V. P. 1852; P. 1861-'67. Trust. 1871-'76. <i>Bul.</i> 1; <i>Pro.</i> 1.

**ELECTED.**

1867. ANDERSON, JAMES H., M. D., Surgeon to the Home for the Aged and Indigent Blind, N. Y.
1864. ANDERSON, WILLIAM C., M. D., Surgeon to S. R. Smith Infirmary, Edgewater, Stapleton, Staten Island, N. Y.
1847. ANDREWS, JARVIS M., M. D., late Surgeon of Police.
1862. ARNOLD, E. S. F., M. D., Newport, R. I.
1876. ARNOLD, JOHN W. S., M. D., Professor of Physiology and Histology in the University of the City of N. Y.
1875. AYRES, SAMUEL, M. D.
1865. BAHAN, THOMAS S., M. D., late Physician to the Northern Dispensary, N. Y.
1867. BALL, A. BRAYTON, M. D., Lecturer on Diseases of the Kidneys in the College of Physicians and Surgeons, N. Y.
1862. BANKS, JAMES L., M. D., Physician to the Presbyterian Hospital; Consulting Physician to the Presbyterian Home for Aged Women, N. Y.; President of Society for the Relief of Widows and Orphans of Medical men, N. Y. Trust. 1867, now in office.
1854. BARKER, B. FORDYCE, M. D., Professor of Clinical Midwifery and Diseases of Women in Bellevue Hospital Medical College; Physician to Bellevue Hospital, N. Y. V. P. 1857. 1876, now in office. *Trans.* 5; *Bul.* 3.
- Original. \* BARKER, LUKE, M. D., *Obit.* 13th December, 1849, *at.* 58.
1854. BARRY, ROBERT A., M. D., late President of the East River Medical Association.
1862. BARSTOW, JOSIAH W., M. D., Physician to Sanford Hall Insane Asylum, Flushing, L. I.
- Original. \* BATCHELDER, JOHN P., M. D., late Professor of Surgery in Berkshire Medical Institution, Pittsfield, Mass.; V. P. 1851-'52; P. 1858. *Obit.* 8th April, 1868, *at.* 83.
1868. BAYNES, GEORGE, M. D., Physician to Northwestern Dispensary, N. Y.
- Original. BEADLE, EDWARD L., M. D., Vice-President of the College of Physicians and Surgeons, N. Y., late Physician to the New York Lying-in Asylum; C. S. 1850-'52; Trust. 1851; V. P. 1853-'57.
- Original. BECKES, JOHN C., M. D., Consulting Physician to the Presbyterian Home for Aged Women, N. Y.
- Original. \* BECK, GEORGE W., M. D., Physician to the New York Dispensary. *Obit.* 9th January, 1848, *at.* 29.

- ELECTED.**  
 1870. BEARD, GEORGE M., M. D., late Physician to the Demilt Dispensary, N. Y. *Bul.* 1.
- Original.** \* BECK, JOHN B., M. D., Professor of Materia Medica and Medical Jurisprudence in the College of Physicians and Surgeons; V. P. 1847 and 1848. *Obit.* 9th April, 1851, *æt.* 56.
- Original.** \* BEDFORD, GUNNING S., M. D., Professor of Obstetrics in the University of the City of New York. *Obit.* 5th September, 1870, *æt.* 64.
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1862. BELDEN, EBENEZER B., M. D.
1863. BELL, AGRIPPA N., M. D., Physician to the Brooklyn City Hospital, Brooklyn, L. I. *Bul.* 2.
1871. BELL, CHRISTOPHER B., M. D., Curator of New York Hospital. *Bul.* 1.
1864. \* BIBBINS, WILLIAM B., M. D., Physician to the Demilt Dispensary; Trust. 1867-71. *Obit.* 16th January, 1871, *æt.* 46.
1871. BILLINGTON, CORNELIUS E., M. D., Physician to the Demilt Dispensary, N. Y. *Trans.* 1.
1872. BLAKE, JOHN ELLIS, M. D.
- Original.** BLAKEMAN, WILLIAM N., M. D.
- Original.** \* BLISS, JAMES C., M. D., V. P. 1850. *Obit.* 31st July, 1855, *æt.* 64.
- Original.** BLIVEN, JEREMIAH P., M. D.
- Original.** \* BLOIS, SAMUEL, M. D., *Obit.* 19th October, 1873, *æt.*
1871. BLUME, SAMUEL, M. D.
1857. BLUMENTHAL, MARK, M. D., President of the Institution for Improved Instruction of Deaf Mutes, N. Y. *Bul.* 1.
1873. BOGERT, CORNELIUS R., M. D., Medical Examiner of the New York Life Insurance Company.
- Original.** \* BOLTON, JACKSON, M. D., R. S. 1852; V. P. 1856. *Obit.* 16th February, 1866, *æt.* 51.
1848. \* BOORAEM, AUGUSTUS C., M. D., *Obit.* 16th December 1871, *æt.* 46.
- Original.** \* BOYD, THOMAS, M. D., *Obit.* 18th March, 1856, *æt.* 83.
1869. BOZEMAN, NATHAN, M. D.
1876. BRADLEY, EDWARD, M. D., late Surgeon to the Demilt Dispensary, N. Y.
1847. \* BRADY, PATRICK J., M. D., *Obit.* 23d October, 1856, *æt.* 42.
1852. \* BROOKS, GEORGE W., M. D., *Obit.* 1853.
1863. BROWN, D. TILDEN, M. D., Physician to the Bloomingdale Asylum for the Insane, N. Y.



## ELECTED.

1867. \* BROWN, JAMES L., M. D., Physician to the Demilt Dispensary, N. Y. *Obit.* 4th February, 1873, *æt.* 41. *Trans.* 1.
1848. BROWN, WILLIAM K., M. D., Brooklyn, L. I.
1848. BRUENINGHAUSEN, CHARLES, M. D.
1875. BRYANT, JOSEPH D., M. D., Surgeon to the Northwestern Dispensary, N. Y.
- Original. BUCK, GURDON, M. D., Surgeon to the New York, and Presbyterian Hospitals; Consulting Surgeon to St. Luke's, and Roosevelt Hospitals, N. Y.; C. S. 1848; V. P. 1852, 1855, 1856, 1859, 1860. *Trans.* 7; *Bul.* 8.
1855. BUDD, CHARLES A., M. D., Professor Emeritus of Obstetrics and the Diseases of Women and Children in the University of the City of New York; Physician to Bellevue, and Mt. Sinai Hospitals, N. Y. *Bul.* 1.
- Original. \* BULKLEY, HENRY D., M. D., Physician to the New York Hospital; V. P. 1862-'68; P. 1870-'71; Trust. 1871. *Obit.* 4th January, 1872, *æt.* 67. *Bul.* 2.
1874. BULKLEY, LUCIUS D., M. D., Physician to the Demilt Dispensary, N. Y.
1848. \* BULLUS, EDWARD, M. D., *Obit.* 25th September, 1854, *æt.* 50.
1856. BUMSTEAD, FREEMAN J., M. D., Consulting Surgeon to St. Elizabeth's Hospital, N. Y.; late Professor of Materia Medica in the College of Physicians and Surgeons, N. Y. *Bul.* 1.
1861. BURKE, JOHN, M. D.
1865. BURRALL, FREDERICK A., M. D., Physician to the Presbyterian Hospital; and to the Presbyterian Home for Aged Women, N. Y.
1854. BYRNE, JOHN, M. D., Surgeon-in-Chief to St. Mary's Hospital for Women, Brooklyn, L. I. *Bul.* 1.
- Original. \* CAMERON, JAMES, M. D., *Obit.* 12th December, 1851, *æt.* 66.
1862. \* CAMMANN, GEORGE P., M. D., late Physician to the Demilt Dispensary; Consulting Physician to St. Luke's Hospital, N. Y. *Obit.* 14th February, 1863, *æt.* 58.
- Original. \* CAMPBELL, JAMES, M. D., *Obit.* 12th March, 1853, *æt.* 59.
1869. CARO, SALVATORE, M. D. *Trans.* 1.
1858. \* CARRINGTON, WILLIAM A., M. D., *Obit.* 17th July, 1866.
- Original. \* CARTER, GALEN, M. D., V. P. 1849-'52; Trust. 1851. *Obit.* 2d April, 1870, *æt.* 74.

**ELECTED.**

1869. CHADSEY, ALONZO J., M. D.
1847. CHALMERS, THOMAS C., M. D., Ex-surgeon to New York Hospital.
1862. CHAMBERLAIN, WILLIAM M., M. D., late Physician to the Demilt Dispensary, N. Y.; Physician to the Charity Hospital, N. Y.; R. S. 1865-'68.
- Original. \* CHAPIN, JOHN R., M. D., *Obit.* 23d June, 1852, *æt.* 41.
1872. CHAUVEAU, JEAN F., M. D.
1847. \* CHEESMAN, JOHN C., M. D., late Surgeon to New York Hospital. *Obit.* 11th October, 1862, *æt.* 75.
1871. CHEESMAN, TIMOTHY MATLACK, M. D.
1865. \* CHILDS, TIMOTHY, M. D., Professor of Anatomy in Bellevue Hospital Medical College. *Obit.* 3d September, 1865, *æt.* 42.
1856. CHURCH, ALLEN S., M. D. *Trans.* 1; *Bul.* 1.
1859. \* CHURCHILL, CHARLES W., M. D., *Obit.* 27th October, 1859.
1856. CLARK, ALONZO, M. D., LL. D., President of, and Professor of Pathology and Practice of Medicine in the College of Physicians and Surgeons, N. Y.; Physician to Bellevue Hospital, N. Y. *Bul.* 2.
1870. CLARK, JAMES G., M. D., W. New Brighton, S. I., N. Y.
- Original. CLARKSON, CORNELIUS V., M. D.
- Original. CLEMENTS, JAMES W. G., M. D., Physician to the New York Institution for the Blind.
1859. \* COCHRAN, GEORGE, M. D., Surgeon to the Brooklyn City Hospital, Brooklyn, L. I. *Obit.* 19th November, 1872, *æt.* 40.
1871. COLES, J. ACKERMAN, M. D., Scotch Plains, N. J.
1854. \* CONANT, DAVID S., M. D., Professor of Surgery in the University of Vermont; Surgeon to the Demilt Dispensary, N. Y. *Obit.* 8th October, 1865, *æt.* 40. *Trans.* 1.
1864. \* CONNOLLY, JAMES J., M. D., Physician to St. Vincent's Hospital, N. Y. *Obit.* 18th June, 1871, *æt.* 36.
- Original. \* COOPER, JAMES S., M. D., Physician to the Home for Aged and Respectable Indigent Females, N. Y. *Obit.* 11th April, 1867, *æt.* 49.
- Original. \* COVEL, JOHN C., M. D., Physician to the New York City Prison. *Obit.* 4th November, 1860, *æt.* 64.
1876. COWLES, EDWARD O., M. D., Visiting Physician to the New York Dispensary.]

## ELECTED.

1862. \* COX, HENRY G., M. D., Professor of the Theory and Practice of Medicine in New York Medical College. *Obit.* 29th May, 1866, *æt.* 47.
1870. CRAMPTON, HENRY E., M. D.
1849. CRANE, JAMES, M. D., Physician to the Brooklyn City Hospital, Brooklyn, L. I.
1847. CRANE, JOHN J., M. D., Surgeon to Bellevue Hospital, N. Y.
1866. CRANE, JOSEPH S., M. D., late Physician to the New York Lying-in Asylum.
1851. \* CREVELING, ABRAHAM, M. D., *Obit.* 28th April, 1853, *æt.* 39.
1868. \* DALTON, EDWARD B., M. D., late Surgeon of, and Medical Director of U. S. Volunteers. *Obit.* 13th May, 1872, *æt.* 37.
1856. DALTON, JOHN C., M. D., Professor of Physiology and Microscopic Anatomy in the College of Physicians and Surgeons, N. Y.; Orator, 1873; V. P., 1874, now in office. *Trans.* 7.
1867. DANA, SAMUEL W., M. D., late Physician to New York Dispensary. *Trans.* 1.
- Original. DAVIS, JOHN, M. D.
- Original. \* DELAFIELD, EDWARD, M. D., President of, and Professor Emeritus of the College of Physicians and Surgeons, N. Y.; Consulting Physician to St. Luke's, and New York State Woman's Hospitals, N. Y. *Obit.* 13th February, 1875, *æt.* 80.
1876. DE LUNA, ABELARDO B., M. D., Physician to the Northern Dispensary, N. Y.
1859. DERBY, EDWARD W., M. D., late Physician to the Eastern Dispensary, N. Y.
- Original. DETMOLD, WILLIAM, M. D., Emeritus Professor of Military and Clinical Surgery in the College of Physicians and Surgeons, N. Y., Consulting Surgeon to the Presbyterian Hospital; V. P. 1853 to 1856; Orator, 1856. *Trans.* 1; *Bul.* 5; *Pro.* 1.
1860. \* DONAGHE, WILLIAM R., M. D., late Lecturer on Surgical Anatomy and Venereal Diseases in the University of the City of New York. *Obit.* 18th July, 1866, *æt.* 36.
1856. DOUGLAS, JOHN H., M. D.
1848. \* DOUGLAS, ROBERT, M. D., *Obit.* 25th July, 1861, *æt.* 47.
- Original. DOWNS, HENRY S., M. D.

**ELECTED.**

- Original.** \* **DRAKE, BENJAMIN, M. D., C. S.** 1847. *Obit.* 11th January, 1871, *æt.* 65.
1858. **DRAPER, WILLIAM H., M. D.,** Clinical Professor of the Diseases of the Skin in the College of Physicians and Surgeons, N. Y.; Physician to New York, and Roosevelt Hospitals, N. Y. *Bul.* 6.
1847. **DUDLEY, WILLIAM H., M. D.,** Consulting Physician to the Long Island College Hospital, Brooklyn, L. I.
1847. \* **DWIGHT, WILLIAM W., M. D.,** *Obit.* 11th July, 1861, *æt.* 54.
1847. \* **EARLE, EDWARD, M. D.,** *Obit.* 21st August, 1849, *æt.* 37.
1851. \* **ELDER, ALEXANDER, M. D.,** late Physician to the Demilt Dispensary, N. Y. *Obit.* 3d February, 1875, *æt.* 70.
1858. **ELIOT, ELLSWORTH, M. D.,** late Vice-President N. Y. State Medical Society; late President of the New York County Medical Society.
1858. \* **ELLIOT, GEORGE T., M. D.,** Professor of Obstetrics in Bellevue Hospital Medical College; Physician to Bellevue Hospital. *Obit.* 28th January, 1871, *æt.* 43. *Trans.* 1; *Bul.* 2.
1870. \* **ELLIS, HENRY A., M. D.,** *Obit.* 25th January, 1876, *æt.*
- Original.** \* **ELLIS, SAMUEL C., M. D.** *Obit.* 20th July, 1874, *æt.* 71.
1872. **ELSBERG, LOUIS, M. D.,** late Clinical Professor of the Diseases of the Throat in the University of the City of New York; Physician to Charity Hospital. *Trans.* 2.
1856. **EMMET, THOMAS ADDIS, M. D.,** Consulting Physician to Roosevelt Hospital; Surgeon to the New York State Woman's Hospital, N. Y.
- Original.** \* **ENOS, DEWITT C., M. D.,** Professor of Anatomy in the Long Island College Hospital; Surgeon to the Brooklyn City Hospital, Brooklyn, L. I. *Obit.* 14th December, 1868, *æt.* 48.
1867. **FARLEY, JAMES L., M. D.,** Brooklyn, New York.
1864. **FARNHAM, HORACE P., M. D.,** late Physician to the Northern Dispensary, N. Y.
- Original.** \* **FERGUSON, JOHN T., M. D.,** *Obit.* 11th October, 1859, *æt.* 55.
1847. \* **FERRIS, FLOYD T., M. D.,** *Obit.* 6th November, 1855, *æt.* 62.
1855. **FINNELL, THOMAS C., M. D.,** late Demonstrator of Anat-  
*By-Laws, August, 1876.*

**ELECTED.**

- omy in the University of the City of New York; Surgeon to St. Vincent's Hospital, N. Y. *Bul.* 1.
1847. \* FISK, LYMAN, M. D., *Obit.* 1st August, 1859, *at.* 36.
1847. FITCH, JAMES D., M. D., Consulting Physician to the Colored Home for Indigent and Aged, N. Y.
1862. FLINT, AUSTIN, M. D., Professor of the Principles and Practice of Medicine and Clinical Medicine in Bellevue Hospital Medical College; Physician to Bellevue Hospital, N. Y.; Orator 1868; V. P. 1871 and 1872; P. 1873 and 1874; Trust. 1875, and now in office. *Trans.* 2; *Bul.* 3.
1862. FLINT, AUSTIN, JR., M. D., Professor of Physiology in Bellevue Hospital Medical College; late Physician to Bellevue Hospital, N. Y.
1870. FOSTER, FRANK P., M. D., Physician to the New York Dispensary, N. Y. *Trans.* 1.
- Original. FOSTER, JOEL, M. D., V. P. 1859 to 1862; Trust. 1862 to 1866.
- Original. \* FOSTER, SAMUEL CONANT, M. D., late Physician to Bellevue Hospital, N. Y.; R. S. 1855 and 1856; V. P. 1858 and 1859; Orator 1861 and 1862. *Obit.* 18th April, 1873, *at.* 56. *Trans.* 1.
1874. FOWLER, GEORGE B., M. D., Examiner in Physiology, College of Physicians and Surgeons, N. Y.; Surgeon to the New York Dispensary. *Trans.* 1.
1856. \* FOY, MICHAEL E., M. D., Surgeon of the 38th Regiment New York Volunteers. *Obit.* 9th June, 1861, *at.* 37.
- Original. \* FRANCIS, JOHN W., M. D., LL. D., late Professor of Obstetrics and Medical Jurisprudence in Rutgers Medical College, N. Y.; Orator 1847; V. P. 1847; P. 1848. *Obit.* 8th February, 1861, *at.* 71.
1863. FRANCIS, SAMUEL W., M. D., Newport, R. I.
1871. FRANKEL, EDWARD, M. D., Physician to Charity Hospital, Physician to the New York, and Eastern Dispensaries, N. Y.
1864. FREEMAN, N. MARSTON, M. D., late Physician to the Yorkville Dispensary, New York.
1870. FROTHINGHAM, WILLIAM, M. D.
1871. FULLER, ROBERT M., M. D.
1865. FURMAN, G., M. D.
1869. GALLATIN, ALBERT H., M. D., Professor of Analytical Chemistry in Cooper Institute, N. Y. *Trans.* 1.

**ELECTED.**

- Original.** GARRISH, JOHN P., M. D., late Surgeon to the New York Ophthalmic Hospital, N. Y.
1870. GAY, HARVEY S., M. D., late Physician to the New York Lying-in Asylum.
1848. GESCHEIDT, ANTHONY, M. D., Hastings-on-the-Hudson, N. Y.
1863. GILFILLAN, WILLIAM, M.D., Professor of Therapeutics and Materia Medica in Long Island College Hospital, Brooklyn, L. I.
1847. \* GILFORD, JACOB T., M. D., *Obit.* 11th June, 1869, *æt.* 63.
1856. GOMEZ, HORATIO, M. D., late Physician to the New York Dispensary, N. Y.
1856. GOULEY, JOHN WM. S., M. D., Professor of Diseases of the Genito-Urinary System, in the University of the City of New York; Surgeon to Bellevue Hospital, N. Y.
1847. \* GRAHAM, JOHN, M. D., *Obit.* 20th May, 1847, *æt.* 46.
1848. \* GREEN, DAVID, M. D., *Obit.* 18th October, 1856, *æt.* 60.
- Original.** \* GREEN, HORACE, M. D., LL. D., Professor of the Theory and Practice of Medicine in New York Medical College. *Obit.* 29th November, 1866, *æt.* 63. *Trans.* 1.
- Original.** \* GREENE, ISAAC, M. D., Surgeon to Bellevue Hospital, N. Y. *Obit.* 2d July, 1854, *æt.* 40.
- Original.** \* GRISCOM, JOHN H., M. D., late Physician to New York Hospital; Orator 1854; V. P. 1854. *Obit.* 28th April, 1874, *æt.* 64. *Trans.* 1; *Bul.* 4.
1872. GRISWOLD, HENRY, M. D.
1847. \* GUERNSEY, PETER B., M. D., Croton Falls, N. Y. *Obit.* 26th November, 1873, *æt.* 69.
1847. \* GUNN, ALEXANDER N., M. D., late Health Officer of the Port of New York. *Obit.* 21st December, 1871, *æt.* 60.
1867. HACKLEY, CHARLES E., M. D., Physician to New York Hospital.
1875. HADDEN, ALEXANDER, M. D., Physician to Presbyterian Hospital, N. Y.
- Original.** HALL, EDWARDS, M. D.
- Original.** HALL, SAMUEL, M. D., late Physician to the New York Dispensary.
1874. HALL, W. H., M. D.
- Original.** \* HALSTED, JONATHAN, M. D., *Obit.* 10th April, 1856, *æt.* 46.



## ELECTED.

1873. HAMILTON, ALLAN McL., M. D., Lecturer on Diseases of Nervous System in the Long Island College Hospital; Statistical Secretary, 1874, now in office. *Trans.* 1.
1864. HAMILTON, FRANK H., M. D., LL. D., late Professor of Military Surgery in Bellevue Hospital Medical College; Surgeon to Bellevue Hospital, N. Y. *Bul.* 2.
1874. HANKS, HORACE T., M. D., Physician to the Demilt Dispensary, New York; A. S., 1874, now in office.
1857. HARRIS, ELISHA, M. D., late Registrar of Vital Statistics of the Health Department of the City of New York. *Bul.* 3; *Pro.* 1.
1859. \*HARSEN, JACOB, M. D., Trust. 1862. *Obit.* 31st December, 1862, *æt.* 54.
- Original. \*HART, JOHN, M. D., *Obit.* 9th August, 1867, *æt.* 57.
1865. \*HAZLETT, JOHN, M. D., *Obit.* 4th March, 1870, *æt.* 53.
1865. HEDGES, DAVID A., M. D., Consulting Physician of the Northwestern Dispensary, N. Y.
1871. HENRY, MORRIS H., M. D., Surgeon-in-Chief to the New York State Emigrants' Hospital, N. Y.
1847. \*HENSCHEL, CHARLES, M. D. *Obit.* 18th September, 1872, *æt.* 63.
1867. HERRICK, EVERETT, M. D.
1857. HERZOG, MAX, M. D., Physician to the German Hospital, N. Y. *Bul.* 1.
1863. \*HEWIT, HENRY S., M. D., Lecturer on Surgery in the University of the City of New York; Surgeon to Charity Hospital, N. Y. *Obit.* 19th August, 1873, *æt.* 47. *Bul.* 1.
1856. HEYWOOD, CHARLES F., M. D., late Physician to St. Luke's Hospital, N. Y.; R. S. 1857 and 1858.
1856. HINTON, JOHN H., M. D., late Lecturer on Surgery in the University of the City of New York; Surgeon to the Presbyterian Hospital; R. S. 1861 to 1865; L., now in office.
1854. HIRSCH, SIMON, M. D.
- Original. \*HOBART, WILLIAM H., M. D., *Obit.* 21st Jan., 1857, *æt.* 52.
1847. \*HOGAN, DANIEL M., M. D., *Obit.* 1849.
1871. HOGAN, EDWARD J., M. D.
1867. HOGAN, MICHAEL, M. D.
1854. HOLCOMBE, WILLIAM F., M. D., A. S. 1856.
- Original. \*HORSFIELD, THOMAS W., M. D., *Obit.* 19th Feb., 1868, *æt.* 64.



**ELECTED.**

1866. HOWARD, BENJAMIN, M. D., late Professor of Clinical and Operative Surgery in Long Island College Hospital; Professor of Diseases of the Genito-Urinary Organs in the University of Vermont.
1872. HOWE, JOSEPH W., M. D., Clinical Professor of Surgery in the University of the City of New York; Surgeon to St. Francis's, and Charity Hospitals, N. Y.
- Original. HUBBARD, SAMUEL T., M. D., Physician to the Presbyterian Hospital; late President New York County Medical Society; C. S. 1853 to 1858; V. P. 1873 to 1876; Trust. 1862 to 1873, 1876, now in office.
1874. HUDSON, E. DARWIN, JR., M. D., Professor of Principles and Practice of Medicine in the Woman's Medical College, N. Y. Orator, 1875. *Trans.* 1.
1866. HULL, JOSEPH J., M. D., late Surgeon to St. Luke's Hospital, N. Y.; Physician to the Nursery and Child's Hospital, N. Y.
1867. HUMPHREYS, GEORGE H., M. D.
1849. \* HUNTER, ABRAHAM T., M. D., *Obit.* 1st August, 1849, *æt.* 52.
1866. HUSTED, NATHANIEL C., M. D.
- Original. \* HUTCHINSON, EUGENE F., M. D., Physician to the New York Dispensary. *Obit.* 2d March, 1848, *æt.* 24.
1857. HUTCHISON, JOSEPH C., M. D., late Professor of Operative Surgery in Long Island College Hospital; Surgeon to Brooklyn City Hospital, Brooklyn, L. I.; V. P. 1869 to 1873. *Trans.* 1.
1848. \* HYSLOP, JAMES, M. D., *Obit.* 17th May, 1870, *æt.* 53.
1850. \* ISAACS, CHARLES E., M. D., Brooklyn, L. I., V. P. 1858. *Obit.* 16th June, 1860, *æt.* 48. *Trans.* 4.
1875. IVES, FRANK L., M. D.
- Original. \* IVES, GEORGE W., M. D., *Obit.* 6th December, 1874, *æt.* 55.
- Original. IVES, JOHN, M. D.
- Original. JACKSON, WILLIAM H., M. D.
1857. JACOBI, ABRAHAM, M. D., Clinical Professor of the Diseases of Children in the College of Physicians and Surgeons, N. Y.; Physician to the German, and Mount Sinai Hospitals, N. Y. *Bul.* 1.
1853. JAMES, EDWARD H., M. D., Professor of Hygiene in the Woman's Medical College, N. Y.; Assistant Sanitary

**ELECTED.**

Superintendent of the Health Department of the City of New York; R. S. 1868 to 1871.

1867. JANVRIN, JOSEPH E., M. D., Assistant-Surgeon to the Woman's Hospital of the State of N. Y.

1852. JENKINS, J. FOSTER, M. D., Consulting Physician to St. John's Riverside Hospital, Yonkers, N. Y.

1855. JOHNSON, LAURENCE, M. D., Physician to the Demilt Dispensary.

1855. \* JOHNSON, WILLIAM J., M. D., *Obit.* 22d September, 1860, *et.* 55.

Original. \* JOHNSTON, FRANK U., M. D., Physician to the New York Hospital; V. P. 1847. *Obit.* 7th January, 1858, *et.* 61.

1851. JONES, ALANSON S., M. D., late Surgeon of Police.

1856. \* JONES, E. LEE, M. D., *Obit.* 30th January, 1876, *et.* 46.

1847. JONES, WILLIAM W., M. D., late Physician to St. Luke's Hospital, N. Y.

1872. JUDSON, ADONIRAM B., A. M., M. D., Assistant Surgeon to the New York Orthopedic Dispensary and Hospital. *Trans.* 1.

1837. \* KAMMERER, JOSEPH, M. D., Professor of Diseases of Women and Children in the University of the City of New York. *Trans.* 1; *Rev.* 2. *Obit.* 10th June, 1873, *et.* 38.

1876. KATTENBACH, WILLIAM H., M. D., Physician to Bellevue Hospital Dispensary, N. Y.

Original. \* KEENE, RAYMOND, M. D., *Obit.* 21st March, 1849, *et.* 26.

Original. KEENE, STEPHEN S., M. D., Providence, R. I.

1847. KENNEDY, JAMES, M. D., 6th Vice-President of the New York College of Medical Science.

1868. KERRICK, JOSEPH, A. M., M. D., Surgeon to St. Vincent Hospital, N. Y.

Original. KILPATRICK, J. SARG., M. D.

1854. \* KILPATRICK, J. SARG., M. D., *Obit.* 29th August, 1872, *et.*

1851. \* KILPATRICK, J. SARG., M. D., *Obit.* 4th May, 1852, *et.*

Original. \* KILPATRICK, J. SARG., M. D., Professor of Surgery in the New York College of Medical Science. *Trans.* 1855 to 1860. *Obit.* 4th May, 1852, *et.* 35.

1878. KILPATRICK, J. SARG., M. D., Surgeon in Charge of the New York Ophthalmic and Ear Hospital; Lecturer on

**ELECTED.**

- Diseases of the Eye and Ear in the College of Physicians and Surgeons, N. Y.
1876. KNIGHT, JAMES, M. D., Resident Physician and Surgeon to the Hospital for the Relief of Ruptured and Crippled, N. Y.
1854. \* KRACKOWIZER, ERNST, M. D., Surgeon to the New York Hospital; Surgeon to the German Hospital, N. Y. *Trans.* 2; *Bul.* 2. *Obit.* 23d September, 1875, *æt.* 53.
1865. LAWRENCE, JONATHAN S., M. D.
1869. LEALE, CHARLES A., M. D., late Surgeon in Charge of Officers' Wards, and Executive Officer U. S. Army General Hospital, Washington; late Physician to the Northwestern Dispensary, N. Y. *Trans.* 3.
1854. LEAMING, JAMES R., M. D., Emeritus Professor of Principles and Practice of Medicine in the Woman's Medical College, N. Y.; Physician to St. Luke's Hospital, N. Y. *Trans.* 2; *Bul.* 3.
1869. LEE, CHARLES C., M. D., Surgeon to Charity Hospital, N. Y.
1874. LEFFERTS, GEORGE M., M. D., Physician to the Demilt Dispensary, N. Y.; Clinical Professor of Laryngoscopy and Diseases of the Throat in College of Physicians and Surgeons, N. Y.
1872. LEO, SIMEON N., M. D., Physician to the Home for Aged Hebrews, N. Y.
1850. \* LEO WOLF, GEORGE, M. D., *Obit.* 14th March, 1855, *æt.* 40.
- Original. LEO WOLF, MORRIS, M. D.
1851. \* LEVERIDGE, BENJAMIN C., M. D., *Obit.* 16th April, 1862, *æt.* 63.
1856. LIDELL, JOHN A., M. D., late Surgeon to Bellevue Hospital, N. Y. *Trans.* 1.
- Original. LINSLEY, JARED, M. D., Consulting Physician to the Presbyterian Hospital, New York Lying-in Asylum, and to the New York Dispensary. Trust. 1865 to 1870.
1864. LITTLE, JAMES L., M. D., Lecturer on Operative Surgery in the College of Physicians and Surgeons, N. Y.; Surgeon to St. Luke's, and St. Vincent's Hospitals, N. Y.
1855. LIVINGSTON, WATTS C., M. D., late Physician to Demilt Dispensary, N. Y.
1876. LOCKROW, ARTHUR V. B., M. D., Physician to Demilt Dispensary, N. Y.
1861. \* LOINES, JONAS P., M. D., Vaccine Physician to the East-

## ELECTED.

- ern Dispensary, N. Y. *Obit.* 15th December, 1873, *æt.* 52.
1863. LOOMIS, ALFRED L., M. D., Professor of Pathology and Practice of Medicine in the University of the City of New York; Physician to Bellevue Hospital, N. Y. *Trans.* 1; *Bul.* 3.
1876. LORDLY, J. E. M., M. D.
1869. LORING, EDWARD G., Jr., M. D., Consulting Ophthalmic Surgeon to St. Luke's, and Brooklyn Eye and Ear Hospitals; Surgeon to the New York Eye and Ear Infirmary. *Trans.* 1.
1876. LUDLUM, W. S., M. D., Physician to Demilt Dispensary, N. Y.
1871. LUSK, WILLIAM T., M. D., Professor of Obstetrics and the Diseases of Women and Clinical Midwifery in Bellevue Hospital Medical College, N. Y.; Physician to the Bellevue Hospital, N. Y.
1875. LYNCH, PATRICK J., M. D.
1847. \* LYON, JAMES L., M. D., *Obit.* 24th December, 1858, *æt.* 50.
1864. MACGREGOR, JAMES R., M. D.
1857. \* McALLISTER, GEORGE, M. D., *Obit.* 29th July, 1864, *æt.* 37.
1866. McCLELLAN, CHRISTOPHER R., M. D., Brooklyn, L. I.
- Original. \* McCLELLAND, JOHN, M. D., late Physician to the New York City Lunatic Asylum. *Obit.* 20th February, 1875, *æt.* 69.
- Original. MCCREADY, BENJAMIN W., M. D., late Professor of Materia Medica in Bellevue Hospital Medical College; Consulting Physician to Bellevue Hospital, N. Y.
1847. \* McDONALD, JAMES, M. D., late Physician to Bloomingdale Lunatic Asylum, N. Y. *Obit.* 5th May, 1849, *æt.* 45.
1876. McLANE, J. W., M. D., Adjunct Professor of Obstetrics in College of Physicians and Surgeons, N. Y.; Physician to St. Luke's, and New York Hospitals, N. Y.
1857. McLEOD, S. B. WYLIE, M. D., late Physician to the New York Lying-in Asylum.
1865. McMILLAN, CHARLES, M. D., late Physician to the Orphan Asylum of the Protestant Episcopal Church, N. Y.
1847. \* MACNEVEN, WILLIAM H., M. D., late Physician to the New York Dispensary, N. Y. *Obit.* 12th May, 1854, *æt.* 38.
1848. McNULTY, JOHN, M. D., late Surgeon U. S. Volunteers. *Bul.* 1.
- Original. \* MANLEY, JAMES R., M. D., late Lecturer on Obstetrics in

**ELECTED.**

- the College of Physicians and Surgeons, N. Y. ; Orator 1848 ; V. P. 1849. *Obit.* 21st November, 1851, *æt.* 69.
1876. MANN, M. D., M. D., Physician to the New York Dispensary ; Lecturer on the Microscope as an Aid to Diagnosis in the College of Physicians and Surgeons, N. Y.
- Original. MARKOE, THOMAS M., M. D., Professor of Surgery in the College of Physicians and Surgeons, N. Y. ; Surgeon to Bellevue, New York, and Roosevelt Hospitals, N. Y. ; L. 1847. *Bul.* 1.
1847. \* MARTIN, JOSEPH, M. D., *Obit.* 26th April, 1864, *æt.* 67. *Bul.* 2.
1872. MARTIN, T. DWIGHT, M. D.
- Original. \* MARVIN, DAVID D., M. D., *Obit.* 21st October, 1852, *æt.* 40.
1872. MASON, JOHN J., M. D., Physician to Hospital for Epileptics and Paralytics, Blackwell's Island, N. Y.
1847. MAXWELL, WILLIAM H., M. D., Consulting Surgeon to the New York Dispensary.
- Original. \* MEIKLEHAM, DAVID S., M. D., *Obit.* 20th November, 1849, *æt.* 45.
1874. METCALFE, FRANCIS J., M. D., Physician to New York Dispensary.
- Original. METCALFE, JOHN T., M. D., Emeritus Professor of Clinical Medicine in the College of Physicians and Surgeons, N. Y. ; Consulting Physician to Bellevue, St. Luke's, and Roosevelt Hospitals. *Trans.* 1 ; *Bul.* 2.
1848. \* MILLER, JOHN, M. D., *Obit.* 13th January, 1863, *æt.* 56.
1848. \* MILLER, WM. ELLISON, M. D., *Obit.* 16th January, 1852, *æt.* 52.
1848. \* MINER, WILLIAM, M. D., *Obit.* 16th November, 1859, *æt.* 45.
- Original. \* MINER, WILLIAM W., M. D., V. P. 1848. *Obit.* 20th March, 1863, *æt.* 83.
1847. MITCHELL, CHAUNCEY L., M. D., late Professor of Obstetrics in Castleton Medical College, Vt. ; Consulting Physician to St. Mary's Hospital. Brooklyn, L. I.
1852. MONELL, JOSEPH A., M. D.
1871. MONELL, JOSEPH S., M. D.
1848. \* MOORE, SAMUEL W., M. D., late Physician to the New York Hospital. *Obit.* 26th August, 1854, *æt.* 67.
1849. \* MORAN, THOMAS, M. D., *Obit.* 1853.

## ELECTED.

1870. MORRIS, MOREAU, M. D., late Sanitary Inspector of the Health Department of the City of New York.
1870. MORRIS, STUYVESANT F., M. D., Physician to the New York Dispensary, N. Y.
1869. MORTON, JEREMIAH C., M. D., Physician to the Northern Dispensary.
1874. MOSHER, JACOB S., M. D., Albany, N. Y.
- Original. \* MOTT, VALENTINE, M. D., LL. D., Professor of Surgery in the University of the City of New York; Consulting Surgeon to New York, and Bellevue Hospitals; P. 1849 and 1857. *Obit.* 26th April, 1865, *æt.* 79. *Trans.* 4.
1875. MUNDÉ, PAUL F., M. D., Assistant Surgeon to the Woman's Hospital, N. Y.
1871. NEFTTEL, WILLIAM B., M. D.
1848. \* NEILSON, JOHN, M. D., *Obit.* 19th June, 1857, *æt.* 82.
1852. \* NELSON, JAMES B., M. D., *Obit.* 28th September, 1874, *æt.* 61.
1874. NESMITH, ROBERT D., M. D.
1847. NICHOLS, ELIAS S., M. D.
1859. NICHOLS, TRUMAN, M. D.
1873. NICOLL, HENRY D., M. D., Physician to the Presbyterian Home for Aged Women, N. Y.
1861. NOEGGERATH, EMIL, M. D., late Professor of Clinical Midwifery in New York Medical College; Physician to the German Hospital, N. Y. *Bul.* 2.
1871. \* NOTT, JOSIAH CLARK, M. D., late Professor of Surgery in Mobile Medical College. *Obit.* 31st March, 1873, *æt.* 69.
1862. NOYES, HENRY D., M. D., Professor of Ophthalmology and Otology in Bellevue Hospital Medical College, N. Y.; Surgeon to the New York Eye and Ear Infirmary. *Bul.* 2.
- Original. \* OGDEN, BENJAMIN, M. D., late Physician to the Bloomingdale Asylum for the Insane; Consulting Physician to St. Luke's Hospital, N. Y.; Trust. 1853 to 1859, 1861. *Obit.* 18th June, 1867, *æt.* 69.
1862. ORDRONAU, JOHN, M. D., late Professor of Medical Jurisprudence in Law School of Columbia College; State Commissioner in Lunacy. Roslyn, N. Y.; Orator 1865.
1873. ORTON, SAMUEL H., M. D.
1861. OTIS FESSENDEN N., M. D., Clinical Professor of

**ELECTED.**

- Diseases in the College of Physicians and Surgeons, N. Y.; Surgeon to Charity Hospital, N. Y.
1870. O'MEAGHER, WILLIAM, M. D., late Physician to the New York Dispensary.
1857. \*O'REILLY, JOHN, M. D., *Obit.* 6th December, 1868, *æt.* 55. *Trans.* 1.
1855. O'SULLIVAN, RICHARD J., M. D., Consulting Physician to the Eastern Dispensary, N. Y.
1871. PACKARD, CHARLES W., M. D., Physician to St. Luke's Hospital, N. Y.
1864. PAINE, MARTYN, A. M., M. D., LL. D., Emeritus Professor of the Institutes of Medicine, *Materia Medica*, and Therapeutics, in the University of the City of New York.
1851. PALMER, LUCIUS N., M. D., Physician to the Brooklyn Dispensary and Hospital, E. D. Brooklyn, L. I.
1869. PARDEE, CHARLES I., M. D., Professor of Diseases of the Ear in the Medical Department of the University of the City of New York; Surgeon to the Manhattan Eye and Ear Hospital, N. Y.
1873. PARIGOT, JULIUS, M. D. *Bul.* 2.
- Original. PARKER, WILLARD, M. D., Professor of Clinical Surgery in the College of Physicians and Surgeons, N. Y.; Consulting Surgeon to the New York, Bellevue, and Roosevelt Hospitals, N. Y.; Trust. 1851; V. P. 1853; P. 1856. *Bul.* 2.
1874. PARKER, WILLARD, JR., M. D.
1847. \*PARKINSON, WILLIAM B., M. D., Physician to the New York Dispensary. *Obit.* 11th May, 1856, *æt.* 45.
1847. \*PAUL, JAMES C., M. D., *Obit.* 5th May, 1859.
1858. PEASLEE, EDMUND R., M. D., LL. D., Professor of Gynecology in Bellevue Hospital Medical College; late Professor of Anatomy in the New York Medical College; late Professor of the Diseases of Women in Albany Medical College, N. Y.; Surgeon to the New York State Woman's Hospital, N. Y.; Orator 1858; V. P. 1868 to 1871; P. 1871 and 1872; Trust. 1873, now in office. *Trans.* 4; *Bul.* 5.
- Original. \*PENNELL, RICHARD, M. D., *Obit.* 11th April, 1861, *æt.* 62.
1850. PETERS, GEORGE A., M. D., Surgeon to the New York, and St. Luke's Hospitals, N. Y.; A. S. 1852.
1870. PETERS, JOHN C., M. D., late President of the Medical



## ELECTED.

- Journal Association of the City of New York; President of the New York Neurological Society. *Trans.* 1.
1874. PEUGNET, EUGENE, M. D.
- Original. \* PHILLIPS, SAMUEL B., M. D., *Obit.* 3d March, 1857, *æt.* 54.
- Original. \* PIATT, WILLIAM F., M. D., *Obit.* 6th May, 1848, *æt.* 42.
1875. PIFFARD, HENRY G., A. M., M. D., Professor of Dermatology in the University of the City of New York; Surgeon to the Charity Hospital, and to the New York Dispensary for the Diseases of the Skin, etc., etc. *Trans.* 1.
1867. PINCKNEY, HOWARD, M. D., Assistant Surgeon to the New York Eye and Ear Infirmary, N. Y.
1873. POLK, WILLIAM M., M. D., Professor of Materia Medica and Therapeutics and Clinical Medicine in Bellevue Hospital Medical College; Physician to Bellevue Hospital, N. Y.
1865. POMEROY, OREN D., M. D., Surgeon to the Manhattan Eye and Ear Hospital, N. Y.; late Physician to the Northern Dispensary, N. Y.
- Original. POND, JAMES O., M. D., T., since 1848, now in office.
1867. POOLEY, J. H., JR., M. D., Professor of Surgery in Starling Medical College, Ohio.
1869. POOLEY, THOMAS R., M. D., Surgeon to Charity Hospital, N. Y., Assistant-Surgeon to the New York Ophthalmic and Aural Institute.
1856. \* PORTER, MORTIMER G., M. D., *Obit.* 24th November, 1863, *æt.* 37. *Bul.* 1.
1847. POST, ALFRED C., M. D., LL. D., President of the Medical Faculty, and Professor Emeritus of Clinical Surgery in the University of the City of New York; Consulting Surgeon to the New York Hospital; Surgeon to the Presbyterian Hospital; Orator 1849; V. P. 1861 to 1866; P. 1867-1868; *Bul.* 4; *Pro.* 1.
1870. POST, WILLIAM, H. B., M. D., Sanitary Inspector, Health Department of the City of New York; A. S. 1871 to 1874.
- Original. \* POWER, WILLIAM, M. D., *Obit.* 14th September, 1858, *æt.* 60.
- Original. \* PRATT, PETER, M. D., *Obit.* 1860, *æt.* 52.
1861. PRINCE, CHRISTOPHER, M. D., late Surgeon New York Police. *Bul.* 2.
1871. PURDY, ALFRED E. M., M. D., late Surgeon New York Police.

- ELECTED.**  
**Original.** PURDY, ALFRED S., M. D.  
**Original.** PURDY, SAMUEL A., M. D., R. S. 1853 and 1854.  
**Original.** PURPLE, SAMUEL S., M. D., Honorary Member of the Medical Society of the State of New York; late Physician to the New York Dispensary; V. P. 1872 to 1874, P. 1875, now in office. *Trans.* 1; *Pro.* 1.  
 1847. PUTNAM, FREDERICK A., M. D.  
 1876. QUACKENBOS, HENRY F., M. D., late Surgeon to the New York Dispensary.  
 1876. RABORG, SAMUEL A., M. D., House Surgeon to Central Dispensary, N. Y.  
 1875. RAMSDELL, EDWIN D., M. D.  
 1851. RANDOLPH, ISRAEL, M. D.  
 1863. RANNEY, HENRY D., M. D.  
 1859. RANNEY, LAFAYETTE, M. D.  
 1851. \* RANNEY, MOSES H., M. D., Physician to the New York City Lunatic Asylum. *Obit.* 7th December, 1864, *æt.* 50. *Bul.* 1.  
 1856. RAPHAEL, BENJAMIN I., M. D., late Professor of Surgery in New York Medical College; Surgeon to Mount Sinai Hospital, N. Y.  
 1859. \* RAY, ROBERT, JR., M. D., *Obit.* 3d July, 1860, *æt.* 27.  
**Original.** \* REESE, DAVID MEREDITH, M. D., LL. D., Professor of the Theory and Practice of Medicine and Medical Jurisprudence in New York Medical College. *Obit.* 13th May, 1861, *æt.* 60.  
 1872. REINFELDER, MAX J., M. D., Physician to St. John's Riverside Hospital, Yonkers, N. Y.  
 1866. REYNOLDS, JAMES B., M. D., Physician to the Nursery and Child's Hospital, N. Y.  
 1855. RICHARDS, JOSEPH W., M. D.  
 1874. ROBERT, CHARLES S., M. D.  
 1874. ROBERTS, NATHAN S., M. D.  
**Original.** \* ROBERTS, WILLIAM C., M. D., late Physician to the Northern Dispensary, N. Y.; Orator 1859, V. P. 1870 to 1873. *Obit.* 9th December, 1873, *æt.* 63. *Bul.* 6.  
**Original.** \* ROBESON, ABEL B., M. D., Physician to Bellevue Hospital, N. Y. *Obit.* 22d March, 1853, *æt.* 36.  
 1872. ROBIE, JOHN W., M. D., Physician to the Masonic Board of Relief, New York.  
 1869. ROCKWELL, ALPHONZO D., M. D. *Bul.* 1.

## ELECTED.

Original. \* ROCKWELL, WILLIAM, M. D., *Obit.* 30th December 1867, *at.* 67.

1873. \* RODENSTEIN, CHARLES F., M. D., Physician to the New York Catholic Protectory, Fordham, N. Y., *Obit.* 18th March, 1876, *at.* 49.

1862. RODENSTEIN, LOUIS A., M. D.

Original. \* RODGERS, JOHN KEARNY, M. D., Surgeon to the New York Hospital; V. P. 1848 to 1851; Trust. 1851. *Obit.* 9th November, 1851, *at.* 58.

1847. \* ROGERS, J. SMYTH, M. D., late Professor of Materia Medica in the New York College of Pharmacy. *Obit.* 29th March, 1851, *at.* 58.

1872. ROOF, STEPHEN W., M. D.

1865. ROOSA, D. B. ST. JOHN, M. D., Professor of Ophthalmology and Otolaryngology in the University of the City of New York; Surgeon to the Manhattan Eye and Ear Hospital, N. Y.; Orator 1874. *Bul.* 1.

1862. ROSENBERG, EMIL, M. D., Physician to the German Dispensary, N. Y.

1858. ROSS, JAMES, M. D., late Physician to the Northern Dispensary, N. Y.

1871. RUSSEL, CHARLES P., M. D., Sanitary Inspector of the Health Department of the City of New York. *Trans.* 2.

Original. SABINE, GUSTAVUS A., M. D., Consulting Physician to the New York State Woman's Hospital, N. Y.

1874. SABINE, THOMAS T., M. D., Adjunct Professor of Anatomy College of Physicians and Surgeons of New York; Surgeon to St. Luke's Hospital, N. Y.

1873. SATTERLEE, F. LE ROY, M. D., Professor of Chemistry, Materia Medica, and Therapeutics in the New York College of Dentistry.

1864. SATTERLEE, RICHARD S., M. D., Brigadier-General U. S. Army.

Original. SAYRE, LEWIS A., M. D., Professor of Orthopedic Surgery Fractures and Dislocations, and Clinical Surgery, in Bellevue Hospital Medical College, N. Y.; Surgeon to Bellevue Hospital, N. Y. *Trans.* 1; *Bul.* 2.

1852. \* SCHILLING, ERNEST, M. D., Physician to New York State Emigrant Hospital, N. Y. *Obit.* 25th April, 1872, *at.* 62.

Original. \* SCHMIDT, JOHN W., JR., M. D., Surgeon to St. Vincent's Hospital, N. Y. *Obit.* 1857, *at.* 50.

1847. SCHRIMER, WILLIAM, M. D.

**ELECTED.**

1874. SCHULTZ, LOUIS F., M. D.
1873. SEGUIN, EDWARD C., M. D., Physician to the Hospital for Epileptics and Paralytics; Clinical Professor of Diseases of the Mind and Nervous System in the College of Physicians and Surgeons, N. Y. *Trans.* 1.
1870. SELL, E. H. M., M. D., Physician to the North-eastern Dispensary, N. Y.
1856. \* SEWALL, JOHN G., M. D., Physician to the North-eastern Dispensary, N. Y. *Obit.* 18th January, 1874, *æt.* 51.
- Original. \* SHANKS, JOHN, M. D., *Obit.* 10th August, 1870, *æt.* 69.
1862. \* SHEPPARD, JOHN W., M. D., *Obit.* 5th October, 1868, *æt.* 46.
- Original. \* SHERWOOD, BURRITT, M. D., *Obit.* 10th August, 1854, *æt.* 53.
1856. SIMS, J. MARION, M. D., Orator 1857. *Bul.* 2.
1876. SMITH, A. A., M. D., Physician to the Demilt Dispensary N. Y.; Lecturer Adjunct upon Clinical Medicine in Bellevue Hospital Medical College, N. Y.
- Original. \* SMITH, DAVID, M. D., *Obit.* 16th January, 1867, *æt.* 57.
1870. \* SMITH, DAVID A., M. D., *Obit.* 9th April, 1872, *æt.* 28.
- Original. \* SMITH, GILBERT, M. D., *Obit.* 16th July, 1851, *æt.* 80.
1858. SMITH, GOUVERNEUR M., M. D., Physician to the New York, and Presbyterian Hospitals; L. 1861, 1862; Orator 1869; V. P. 1875, now in office. *Trans.* 5; *Bul.* 3.
1864. SMITH, HANBURY, M. D.
1853. SMITH, JAMES O., M. D.
1867. SMITH, JEROME C., M. D., late Physician to the North-eastern Dispensary, N. Y.
- Original. \* SMITH, JOSEPH MATHER, M. D., Professor of the Theory and Practice of Medicine, and subsequently of Materia Medica and Clinical Medicine in the College of Physicians and Surgeons, N. Y., 1826-1866; Physician to New York Hospital; Orator 1850; V. P. 1850 and 1851; P. 1854. *Obit.* 22d April, 1866, *æt.* 77. *Bul.* 2.
1856. SMITH, J. LEWIS, M. D., Clinical Professor of the Diseases of Children in Bellevue Hospital Medical College, N. Y.; Physician to Charity and Infant Hospitals, N. Y. *Trans.* 2.
1866. SMITH, OSCAR G., M. D., Physician to Northern Dispensary.
1855. SMITH, STEPHEN, M. D., Professor of Orthopedic Surgery and Surgical Jurisprudence in the University of the City of New York; late Professor of Anatomy in



## ELECTED.

- Bellevue Hospital Medical College, N. Y.; Surgeon to Bellevue Hospital; Orator 1867. *Bul.* 1.
1870. SNELLING, FREDERICK G., M. D.
1847. \* SNOWDEN, JOHN, M. D., *Obit.* 22d January, 1848, *æt.* 33.
1864. SPEIR, S. FLEET, M. D., Surgeon to the Brooklyn City Hospital, Brooklyn, L. I.
- Original. \* SPRING, EDWARD, M. D., *Obit.* 13th February, 1850, *æt.* 42.
1859. SQUIBB, EDWARD R., M. D., Brooklyn, L. I. *Bul.* 4.
1876. STANLEY, C. GRAHAM, M. D.
- Original. \* STEARNS, JOHN, M. D., P. 1847. *Obit.* 17th March, 1848, *æt.* 78.
- Original. \* STEPHENSON, MARK, M. D., Physician to the Ophthalmic Hospital, N. Y. *Obit.* 28th August, 1865, *æt.* 62.
- Original. \* STEVENS, ALEXANDER H., M. D., LL. D., Emeritus Professor of Surgery in the College of Physicians and Surgeons, N. Y.; Consulting Surgeon to New York Hospital; P. 1851. *Obit.* 30th March, 1869, *æt.* 79.
1847. \* STEWART, JAMES, M. D., Consulting Physician to the Northern Dispensary, N. Y. *Obit.* 12th September, 1864, *æt.* 65. *Trans.* 1.
1847. \* STICKNEY, JOSIAH DWIGHT, M. D., *Obit.* 30th September, 1849, *æt.* 34.
1865. \* STILES, R. CRESSON, M. D., Professor of Physiology in Berkshire Medical Institution, Mass.; Consulting Physician to Kings County Hospital, L. I. *Obit.* 17th April, 1873, *æt.* 42.
1876. STIMSON, D. M., M. D., Professor of Anatomy in the Woman's Medical College of the New York Infirmary.
- Original. \* STIMPSON, EDWIN B., M. D., late Physician to the New York Lying-in Asylum. *Obit.* 15th May, 1858, *æt.* 36.
1865. STIRLING, THOMAS B., M. D., Resident Physician New York Lying-in Asylum.
1876. ST. JOHN, SAMUEL B., M. D., Physician to New York Dispensary.
- Original. \* STONE, JOHN O., M. D., late Surgeon to Bellevue Hospital, N. Y. *Obit.* 7th June, 1876, *æt.* 63. *Bul.* 1.
- Original. STORER, EBENEZER, M. D.
1874. STRACHAN, A. RUSSELL, M. D.
1859. SWAN, CHARLES Y., M. D.
- Original. \* SWEENEY, HUGH, M. D., *Obit.* 15th Sept., 1857, *æt.* 52.

**ELECTED.**

1851. \* SWEENEY, JAMES, M. D., *Obit.* 1872.
1847. \* SWETT, JOHN A., M. D., Professor of the Theory and Practice of Medicine in the University of the City of New York; Physician to the New York Hospital; Orator 1853. *Obit.* 18th September, 1854, *æt.* 45.
1866. \* SWIFT, FOSTER, M. D., late Professor of Obstetrics and the Diseases of Women and Children in Long Island College Hospital, Brooklyn, L. I. *Obit.* 10th May, 1875, *æt.* 41.
1876. SWIFT, SAMUEL, M. D., Physician to St. John's Riverside Hospital, Yonkers, N. Y.
- Original. \* TAFT, MARCUS L., M. D., A. S. 1848. *Obit.* 8th February, 1850, *æt.* 29.
1872. TAUSZKY, RUDOLPH, M. D.
1867. TAYLOR, CHARLES F., M. D., Surgeon to the Orthopædic Dispensary, N. Y. *Bul.* 2.
- Original. TAYLOR, ISAAC E., M. D., President of, and Emeritus Professor of Obstetrics and the Diseases of Women in Bellevue Hospital Medical College, N. Y.; Consulting Physician to Bellevue, Charity, and Infants' Hospitals; V. P. 1857 and 1858; Trust. 1872, now in office. *Trans.* 2; *Bul.* 3.
1862. TEATS, SYLVESTER, M. D.
1848. TELCAMPF, THEODORE A., M. D., late Physician-in-Chief to New York State Emigrants' Hospital.
1865. TELLER, SELIGMANN, M. D., late Physician to Mount Sinai Hospital, N. Y.
1847. \* THAYER, HENRY W., M. D., *Obit.* 21st May, 1857, *æt.* 50.
1859. THEBAUD, JULIUS S., M. D., Surgeon to St. Vincent's Hospital, N. Y.
1857. THOMAS, T. GAILLARD, M. D., Professor of Obstetrics and the Diseases of Women and Children in the College of Physicians and Surgeons, N. Y.; Physician to Bellevue Hospital, N. Y.; Surgeon to the New York State Woman's Hospital, N. Y.; R. S. 1858 to 1861. *Trans.* 2; *Bul.* 1.
1869. THOMPSON, GEORGE, M. D., Surgeon to the New York Dispensary.
1864. THOMS, WILLIAM F., M. D., Statistical Secretary 1868 to 1873. *Bul.* 1.
1864. THOMSON, WILLIAM H., M. D., Professor of Materia Medica and Therapeutics in the University of the City of New York; Physician to Bellevue Hospital, N. Y. *Bul.* 2.

- ELECTED.**  
 1867. \*TOWNSEND, JOHN F., M. D., *Obit.* 8th January, 1874, *at.* 64.  
**Original.** \*TOWNSEND, PETER S., M. D., *Obit.* 26th March, 1849, *at.* 54.  
 1857. TUCKER, CHARLES P., M. D., Physician to the Home for Friendless Women, New York.  
 1863. \*TUCKER, GEORGE H., M. D., *Obit.* 25th January, 1863, *at.* 34.  
 1854. \*TUTTLE, JOHN T., M. D., *Obit.* 27th January, 1870, *at.* 68.  
 1854. \*UHL, DAVID, M. D., *Obit.* 17th September, 1858, *at.* 36.  
**Original.** \*UNDERHILL, ALFRED, M. D., V. P. 1863 to 1866; Trust. 1866 to 1873. *Obit.* 7th December, 1873, *at.* 64. *Bul.* 2.  
 1847. \*VACHÉ, ALEXANDER F., M. D., Physician to the Marine Hospital, S. I. *Obit.* 9th June, 1857, *at.* 57.  
**Original.** \*VAN ARSDALE, HENRY, M. D., Morristown, N. J. *Obit.* 25th January, 1864.  
**Original.** VAN ARSDALE, HENRY, M. D.  
 1847. \*VAN ARSDALE, PETER, M. D., *Obit.* 1858.  
 1856. \*VAN BUREN, PETER, M. D., *Obit.* 5th December, 1873, *at.* 71.  
**Original.** \*VAN BUREN, THOMAS, M. D., *Obit.* 1848.  
**Original.** VAN BUREN, WILLIAM H., M. D., Professor of the Principles of Surgery and Diseases of the Genito-Urinary Organs and Clinical Surgery in Bellevue Hospital Medical College, N. Y.; Consulting Surgeon to New York, and Bellevue Hospitals, N. Y.; V. P. 1858. *Trans.* 3; *Bul.* 1.  
 1859. VAN DOREN, MATTHEW D., M. D.  
**Original.** \*VAN KLEEK, JOHN R., M. D., late President of the New York County Medical Society, and of the Society for Relief of Widows and Orphans of Medical Men; Trust. 1861 to 1866. *Obit.* 2d January, 1876, *at.* 66.  
 1847. VAN PELT, MOSES D., M. D., V. P. 1860 to 1863; Trust. 1864 to 1869.  
 1847. VAN WINKLE, EDWARD H., M. D.  
 1847. VANDERFOEL, EDWARD, M. D.  
 1859. \*VANDERVEEK, JACOB H., M. D., *Obit.* 20th August, 1873, *at.* 55.  
**Original.** VADERVOORT, JOHN L., M. D., R. S. 1849.  
 1847. VARICK, THEODORE R., M. D., Surgeon to Charity, and St. Francis's Hospitals, Jersey City, N. J.




- ELECTED.**  
 1862. \* VEDDER, Joseph H., M. D., *Obit.* 18th July, 1864, *æt.* 33.  
 1854. \* VON ROTH, WOLDEMAR, M. D., *Obit.* 1857.
1876. WAGNER, CLINTON, M. D., Physician to Metropolitan Throat Hospital, N. Y.  
 1870. WALSER, THEODORE, M. D., late Deputy Health-Officer of the Port of New York, New Brighton, S. I. *Trans.* 1.  
 1873. WARD, EDWIN F., M. D., late Physician to the Demilt Dispensary, N. Y.  
 1863. WARNER, EVERARDUS B., M. D., House Surgeon to the Northern Dispensary, N. Y.
- Original.** \* WASHINGTON, JAMES A., M. D., *Obit.* 30th August, 1847. *æt.* 45.  
 1853. \* WATSON, JOHN, M. D., Surgeon to the New York Hospital; Orator 1855 and 1860; V. P. 1856; P. 1859 and 1860. *Obit.* 3d June, 1863, *æt.* 56. *Trans.* 1; *Bul.* 1.  
**Original.** \* WATTS, ROBERT, Jr., M. D., Professor of Anatomy in the College of Physicians and Surgeons, N. Y.; T. 1847. *Obit.* 8th September, 1867, *æt.* 55.
1876. WEBB, Z. SWIFT, M. D.  
 1867. WEBER, LEONARD, M. D.
- Original.** \* WEEKS, CYRUS, M. D., *Obit.* 20th September, 1875, *æt.* 68.  
 1866. WEIR, ROBERT F., M. D., Surgeon to St. Luke's, Roosevelt, and the New York Hospitals; Surgeon to the New York Eye and Ear Infirmary.  
 1870. WEISSE, FANEUIL D., M. D., Professor of Practical and Surgical Anatomy in the University of the City of New York.
- Original.** WELLS, OVID P., M. D.
- Original.** \* WHITE, AMBROSE L., M. D., late Physician to the Eastern Dispensary, N. Y. *Obit.* 2d June, 1865, *æt.* 61.  
 1858. WHITE, FRANCIS V., M. D., late Physician to the Eastern Dispensary, N. Y.
- Original.** WHITE, OLIVER, M. D., Consulting Physician to the Presbyterian Hospital, N. Y.; V. P. 1866 to 1870; Trust. 1871 to 1876.
- Original.** \* WHITE, SAMUEL P., M. D., late Professor of Surgery in the Berkshire Medical Institution, Mass.; Trust. 1853 to 1858. *Obit.* 6th June, 1867, *æt.* 65.  
 1875. WHITE, WHITMAN V., M. D.  
 1867. WHITE, WILLIAM T., M. D., Physician to Charity Hospital; Surgeon to the Presbyterian Hospital; Surgeon

**ELECTED.**

- to the Demilt Dispensary, N. Y. ; A. S. 1868 to 1870;  
R. S. 1871 to 1876, now in office.
1869. WHITEHEAD, WILLIAM R., M. D., late Physician to the  
Northwestern Dispensary, N. Y.
1875. WIENER, JOSEPH, M. D.
1847. WILKES, GEORGE, M. D., Consulting Surgeon to the New  
York Eye and Ear Infirmary.
- Original. \* WILLIAMS, MERRILL W., M. D., *Obit.* 3d December,  
1873, *æt.* 72.
1860. \* WINCHELL, MARTIN E., M. D., *Obit.* 1st May, 1864, *æt.*  
34. *Bul.* 1.
1869. WINSTON, GUSTAVUS S., M. D., late Physician to the De-  
milt Dispensary, N. Y.
- Original. \* WOOD, ISAAC, M. D., Consulting Physician to Bellevue  
Hospital, N. Y. ; V. P. 1849 ; P. 1850 and 1853 ;  
Trust. 1851 and 1852, 1859 to 1863. *Obit.* 25th  
March, 1868, *æt.* 74.
- Original. WOOD, JAMES R., M. D., LL. D., Emeritus Professor of  
Surgery in Bellevue Hospital Medical College, N. Y. ;  
Consulting Surgeon to Charity, and St. Vincent's Hos-  
pitals, N. Y. ; Surgeon to Bellevue Hospital, N. Y. ;  
V. P. 1857.
- Original. WOOD, STEPHEN, M. D.
1857. WOODHULL, HENRY W. B., M. D.
1852. \* WOODWARD, GEORGE F., M. D., *Obit.* 1857.
1871. WOOLEY, JAMES V. S., M. D., Physician to the Presby-  
terian Hospital, and to the Presbyterian Home for  
Aged Women, N. Y.
- Original. WORSTER, JOSEPH, M. D.
1869. WRIGHT, CHARLES, M. D.
1875. WYLIE, W. GILL, M. D. *Trans.* 1.
1873. YALE, LE ROY M., M. D., Surgeon to Charity Hospital,  
N. Y. ; Lecturer Adjunct upon Orthopedic Surgery in  
Bellevue Hospital Medical College, N. Y.

---

 In order to secure accuracy in the list of Fellows of  
the Academy, it is requested that any change of Title,  
Appointment, or Residence, be reported to the Secretary  
without delay.

## NON-RESIDENT FELLOWS.

---

- \* BERGER, FRANCIS E., M. D., Paris, France. *Obit.* 1st February, 1866, *æt.* 77.
- CORSON, JOHN W., M. D., late Physician to the New York Dispensary. Orange, N. J.
- DRAPER, JOHN W., M. D., LL. D., late President of the Medical Faculty, and Emeritus Professor of Chemistry and Physiology in the University of the City of New York. Hastings on Hudson, N. Y.
- DUNSTER, EDWARD S., M. D., late Professor of Midwifery and Diseases of Women in Vermont Medical College.
- HEPBURN, JAMES C., M. D., Japan.
- JOHNSTON, FRANK U., Jr., M. D., Cooperstown, N. Y.
- \* LEE, CHARLES ALFRED, M. D., Emeritus Professor of Materia Medica and Hygiene in Buffalo Medical College, Peekskill, N. Y. *Obit.* 14th February, 1872, *æt.* 71.
- \* LEWIS, WILLIAM B., M. D., Florida. *Obit.* 16th June, 1874, *æt.* 32.
- MERRITT, J. KING, M. D., Flushing, L. I.
- NORTH, NELSON J., M. D., South Carolina.
- SANDS, AUSTIN L., M. D., Newport, R. I.
- SHRADY, GEORGE F., M. D., New York City.
- SLOAN, WILLIAM J., M. D., U. S. A.
- STEWART, F. CAMPBELL, M. D.
- THOMPSON, BRADFORD S., M. D., Salisbury, Conn.
- \* VAN ARSDALE, HENRY, M. D., Morristown, N. J. *Obit.* 25th January, 1864.
- VERMILYE, WILLIAM E., M. D., Pittsfield, Mass.

## HONORARY FELLOWS.

---

**ELECTED.**

- 1871.     BOWDITCH, HENRY I., M. D., Professor of Clinical Medicine in Harvard University, Boston, Mass.
- 1859.     \* GIBSON, WILLIAM, M. D., Professor of the Principles and Practice of Surgery in the University of Pennsylvania, Philadelphia, Pa. *Obit.* 2d March, 1868, *æt.* 80.
- 1876.     GROSS, SAMUEL D., M. D., LL. D., D. C. L. Oxon., Professor of Surgery in Jefferson Medical College, Philadelphia, Pa.
- 1857.     \* IVES, ELI, M. D., Professor of Materia Medica and Botany in Yale College, New Haven, Conn. *Obit.* 8th October, 1861, *æt.* 82.
- 1860.     \* JACKSON, JAMES, M. D., Professor Emeritus of the Practice of Physic in Harvard University, Cambridge, Mass. *Obit.* 27th August, 1867, *æt.* 90.
- 1859.     \* LA ROCHE, RENE, M. D., Member of the American Philosophical Society, Philadelphia, Pa. *Obit.* 9th December, 1872, *æt.* 77.
- 1859.     \* MUSSEY, REUBEN D., M. D., Professor of Surgery in the Medical College of Ohio, Cincinnati, O. *Obit.* 21st June, 1866, *æt.* 86.
- 1857.     \* SPAULDING, MATHIAS, M. D., of Amherst, Mass. *Obit.* 22d May, 1865, *æt.* 95.
- 1871.     STILLÉ, ALFRED, M. D., Professor of Clinical Medicine in the University of Pennsylvania, Philadelphia, Pa.
- 1874.     VANDERPOEL, S. OAKLEY, M. D., Professor of Theory and Practice and Clinical Medicine in Albany Medical College, Albany, N. Y.; Health Officer of the Port of New York.
- 1871.     WOOD, GEORGE B., M. D., LL. D., Professor Emeritus of the Theory and Practice of Medicine in the University of Pennsylvania, Philadelphia, Pa.

## CORRESPONDING FELLOWS.

---

**ELECTED.**

- 1873.     ACLAND, HENRY W., M. D., F. R. S., Regius Professor of Medicine in the University of Oxford, England.
- 1856.    \* ADAMS, FRANCIS, M. D., LL. D., Surgeon, Banchory, Scotland.
- 1847.    \* AGASSIZ, LOUIS JOHN R., M. D., F. R. S., Professor of Natural History in Harvard University, Cambridge, Mass. *Obit.* 14th December, 1873, *æt.* 66.
- 1850.    \* AMUSSAT, JEAN ZUILME, M. D., Member of the Royal Academy of Medicine, Paris, France. *Obit.* 12th May, 1856, *æt.* 58.
- 1854.    \* ANDRAL, GABRIEL, M. D., Professor of Pathology in the Faculty of Medicine, Paris, France. *Obit.* 13th February, 1876, *æt.* 78.
- 1854.     BARTHEZ, ERNST, M. D., Paris, France.
- 1847.    \* BECK, THEODRICK ROMEYN, M. D., LL. D., Professor of Medical Jurisprudence in Albany Medical College. *Obit.* 19th November, 1855, *æt.* 64.
- 1857.    \* BENNETT, JOHN HUGHES, M. D., Professor of Medicine in the University of Edinburgh, Scotland. *Obit.* 25th September, 1875, *æt.* 63.
- 1854.     BIGELOW, JACOB, M. D., Professor of Materia Medica in Harvard University, Cambridge, Mass.
- 1847.    \* BLATCHFORD, THOMAS W., M. D., Troy, N. Y. *Obit.* 7th January, 1866, *æt.* 71.
- 1867.     BROWN-SÉQUARD, C. E., M. D., Paris, France.
- 1849.    \* BUREAUD-RIOFREY, A. M., M. D.
- 1871.     CHAMBERS, THOMAS K., M. D., Physician to and Lecturer on Medicine at St. Mary's Hospital, London.
- 1847.    \* CIVIALE, JEAN, M. D., Honorary Member of the Academy of Medicine, Paris, France. *Obit.* 13th June, 1867, *æt.* 75.

**ELECTED.**

1866. CUNHA, JOSÉ DE, M. D., Rio Janeiro, Brazil.
1868. DAVIS, NATHAN S., M. D., Professor of the Principles and Practice of Medicine in Chicago Medical College.
1872. DICHIARA, FRANCESCO, M. D., Palermo, Italy.
1850. \* DICKSON, SAMUEL H., M. D., Professor of the Institutes of Medicine in South Carolina Medical College. *Obit.* 31st March, 1872, *æt.* 74.
1871. DICKINSON, WILLIAM H., M. D., Physician to and Lecturer on Pathology at St. George's Hospital, London, England.
1854. \* DUBOIS, BARON PAUL, Dean and Professor of Clinical Midwifery in the Faculty of Medicine of Paris, France. *Obit.* 29th November, 1871, *æt.* 76.
1867. DUMONT, HENRI, M. D., Havana, Cuba.
1848. DUPIERRIS, MARTIAL, M. D., Havana, Cuba.
1876. ERICKSEN, JOHN ERIC, F. R. C. S., late Professor of Surgery in University College, London, England.
1850. \* FENNER, ERASMUS D., M. D., Professor of the Theory and Practice of Medicine in New Orleans School of Medicine. *Obit.* 4th May, 1866, *æt.* 59.
1849. FERGUSON, SIR WILLIAM, F. R. S. Surgeon to King's College Hospital, London, England.
1851. GROSS, SAMUEL D., M. D., late Professor of Surgery in the Medical Department of Louisville University, Louisville, Ky.
1855. \* GUGGENBUHL, JEAN L., M. D., Abendberg, Switzerland. *Obit.* February, 1863.
1847. \* HARRIS, THOMAS, M. D., Surgeon-General U. S. Navy, Washington, D. C. *Obit.* 4th March, 1862, *æt.*
1848. \* HOLLAND, SIR HENRY, Bart., M. D., D. C. L., LL. D., F. R. S., Physician to H. M. the Queen, London, England. *Obit.* 29th October, 1873, *æt.* 85.
1850. \* HOOKER WORTHINGTON, M. D., Professor of the Theory and Practice of Medicine in Yale College, New Haven, Conn. *Obit.* 6th November, 1867, *æt.* 61.
1874. JENNER, SIR WILLIAM, Bart., M. D., D. C. L., F. R. S., Professor of Clinical Medicine in University College, London, England.
1853. \* LEROY DE ETIOLLES, JEAN J. J., M. D., Paris, France. *Obit.* July, 1860, *æt.* 62.
1871. \* NÉLATON, AUGUSTE, Professor of Clinical Surgery in the University of Paris, France. *Obit.* 20th September, 1873, *æt.* 65.
1874. MITCHELL, S. WEIR, M. D., Philadelphia.



**ELECTED.**

1874. OWEN, RICHARD, M. D., Hunterian Professor in the Royal College of Surgeons, London, England.
1874. PAGET, Sir JAMES, Bart., M. D., F. R. S., D. C. L., Consulting Surgeon to St. Bartholomew's Hospital, London, England.
1857. PEASLEE, EDMUND R., M. D., Professor of Surgery in Dartmouth Medical College, Hanover, N. H.
1853. PRINCE VIROMMA LUANG SI TIRAT SANIK, Siam.
1868. POST, GEORGE E., M. D., Beirut, Syria.
1874. REGO, JOSÉ PEREIRA, FILHO, M. D., Rio Janeiro, Brazil.
1850. REYNOLDS, EDWARD, M. D., Boston, Mass.
1852. RICORD, PHILIPPE, M. D., Member of the Royal Academy of Medicine, Paris, France.
1854. RILLIET, FRANÇOIS, M. D., Paris, France.
1860. ROESSER, D. P., M. D., Athens, Greece.
1849. \* ROGET, PETER MARK, M. D., F. R. S., Professor of Physiology in the Royal Institution of Great Britain, London. *Obit.* 12th September, 1869, *æt.* 90.
1871. ROKITANSKY, CARL, M. D., Professor of Pathology in the University of Vienna.
1856. \* SIMPSON, JAMES Y., M. D., Professor of Midwifery in the University of Edinburgh, Scotland. *Obit.* 8th May, 1870, *æt.* 59.
1848. SMITH, ASHBEL, M. D., Texas.
1874. STEWART, F. CAMPBELL, M. D.
1872. TILT, EDWARD J., M. D., Consulting Physician to the Farringdon General Dispensary, London, England.
1852. TOWNSEND, JAMES C., M. D., Long Island, N. Y.
1852. \* VELPEAU, ALFRED A. L. M., Professor of Clinical Surgery in the Faculty of Medicine of Paris, Surgeon to the Hôpital de la Charité, Paris. *Obit.* 23d August, 1867, *æt.* 72.
1871. VIRCHOW, RUDOLPH, M. D., Professor of Pathological Anatomy in the University of Berlin.
1869. VOSS, LOTHAR H., M. D., of Berleberg, Prussia.
1874. WHITE, JAMES P., M. D., Professor of Obstetrics and the Diseases of Women and Children in the Medical Department of the University of Buffalo, Buffalo, N. Y.
1857. \* WING, JOEL A., M. D., late President New York State Medical Society, Albany, N. Y. *Obit.* 6th September, 1852, *æt.* 64.
1867. WORTABET, JOHN, M. D., Beirut, Syria.

# LIST OF CONTRIBUTORS

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WITH THE AMOUNTS PAID TO JULY, 1876.

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# CONSTITUTION.

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## ARTICLE I.

THIS Association shall be called the NEW YORK ACADEMY OF MEDICINE, and shall be composed of Resident, Non-Resident, Corresponding, and Honorary Fellows, and Benefactors.

## ARTICLE II.

The object of the Academy shall be :  
The promotion of the Science and Art of Medicine.

## ARTICLE III.

SECTION 1. Each candidate for Resident Fellowship must have been a graduate or licentiate in medicine residing in this city and county, or in either of the counties of this State thereunto adjoining, for three years.

SEC. 2. Resident Fellows, removing from the city or vicinity, may become Non-Resident Fellows by vote of the Academy. Upon resuming residence, they may be re-admitted to Resident Fellowship in the same way.

SEC. 3. Surgeons of the Army or Navy may be admitted as Non-Resident Fellows.

SEC. 4. Corresponding Fellows must be men of eminence, actively engaged in the cultivation of Medical Science. Their number shall be limited to one hundred.

SEC. 5. Honorary Fellows must be citizens of the United States, and distinguished in their profession. Their number shall be limited to fifty.

SEC. 6. Any person having rendered illustrious services to the Academy, may be elected a Benefactor.



## ARTICLE IV.

SECTION 1. There shall be a President, three Vice-presidents, a Recording Secretary, a Corresponding Secretary, a Treasurer, and five Trustees, and a Treasurer for the latter.

These officers, together with the chairmen of the standing committees, shall constitute a Council. There shall also be a Librarian, a Statistical and an Assistant Secretary, the latter to be nominated by the Recording Secretary, and all to be appointed by the Council.

SEC. 2. The President shall be elected for the term of two years; the Vice-presidents for the term of three years, one retiring, and one being elected each year; the Treasurer for the Board of Trustees for five years.

The Recording and Corresponding Secretaries and the Treasurer shall be elected for the term of three years; the Statistical Secretary and the Trustees for the term of five years, one Trustee being elected and one retiring each year.

## ARTICLE V.

SECTION 1. The following Standing Committees shall be elected for the term of five years by ballot, and shall consist of five members each, one member for each committee being elected and one retiring yearly. No Fellow shall be eligible for re-election in the same Standing Committee until one year after the expiration of his term of service.

1. A Committee on Annals. 2. A Committee on Medical Films. 3. A Committee on Library.

SECTION 2. The Academy shall be divided into ten sections.

Section 1. Anatomy, Histology, and Pathology. Section 2. Surgery. Section 3. Therapeutics and Practice of Medicine. Section 4. Obstetrics and Diseases of Women and Children. Section 5. Medical Maladies and Therapeutics. Section 6. Public Health, Hygiene, Medical Social Medicine, and Vital Statistics. Section 7. Ophthalmology. Section 8. Neurology. Section 9. Dermatology and Syphilis. Section 10. Laryngology and Rhinology. Any new section may at any time be proposed and its constitution and name may be adopted and approved by a majority of the members of the Academy, and approved by a majority of the members of the Board of Trustees present at a stated meeting.

ARTICLE VI.

SECTION 1. Every Fellow shall be furnished with a copy of the Constitution and By-Laws and a duly authenticated certificate of fellowship, which may be revoked for cause; and in case of refusal to surrender the same, the Academy may publish such revocation in the public journals.

SEC. 2. Any Fellow, having complied with the requirements of the Constitution and By-Laws, may resign his fellowship, by presenting at a stated meeting a communication in writing to that effect; but no resignation shall be valid until accepted by the Academy.

ARTICLE VII.

SECTION 1. The Academy may punish violations of its regulations by reprimand, suspension or expulsion.

SEC. 2. A three-fourths vote of the Resident Fellows present shall be necessary to expel a member. This vote shall not be taken unless the announcement of the meeting contains a notice of the motion to expel a Fellow.

ARTICLE VIII.

No part of this Constitution shall be altered, except by a vote of three-fourths of the Resident Fellows present at a stated meeting, subsequent to one at which a proposition to that effect shall have been made in writing, and then only after a printed notice of the proposed alteration has been sent to every Resident Fellow.

# BY-LAWS.

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## I. MEETINGS AND NOMINATIONS.

SECTION 1. The stated meetings of the Academy shall be held on the first and third Thursdays of every month, at 8 o'clock P. M., except when the regular day is the first of January.

SEC. 2. There shall be a recess during the months of July, August and September.

SEC. 3. The Anniversary Discourse shall be delivered in November.

SEC. 4. At the first stated meeting in December all nominations for the officers to be elected by the Academy shall be made. At the first stated meeting in January the elections shall be held, and all Annual Reports presented, except under extraordinary circumstances when special provision may be made.

SEC. 5. Special meetings may be called at any time by the President, and shall be upon the requisition, in writing, of any ten Resident Fellows.

SEC. 6. For special meetings three days' notice must be given when practicable, and no business shall be transacted except that stated in the call.

SEC. 7. At all meetings, twenty-one Resident Fellows shall be necessary to constitute a quorum.

## II. PRESIDENT.

The President shall preside over all meetings, regulate all debates, call for reports, summon extraordinary meetings on urgent occasions, sign all diplomas, letters testimonial, and other documents requiring his signature, appoint all committees not otherwise provided for, announce the result of all votes, introduce all Corresponding, Non-Resident, and Honor-

ary Fellows, or distinguished guests who may be present, designate one or more Fellows to prepare suitable memoirs of deceased Fellows, and be, *ex officio*, a member of all standing committees, and of the Board of Trustees.

### III. VICE-PRESIDENTS.

The Vice-Presidents shall assist the President in the discharge of his duties, and in his absence preside in the order of rank.

### IV. RECORDING SECRETARY.

The Recording Secretary shall keep minutes of the proceedings of all meetings ; notify officers and members of committees of their appointment and the duties required of them ; sign diplomas, and certify to all official acts requiring certificates either in connection with or independently of the President, as the case may be ; attest and affix the common seal to all diplomas, letters-testimonial, and other documents requiring the seal of the Academy and signature of the President ; conduct the domestic correspondence of the Academy, receive the signatures and initiation fees of newly admitted Fellows, and pay the moneys thus received over to the Treasurer ; be, *ex officio*, a member of the standing committees and of the Board of Trustees ; and transact such other business in his department as may be ordered by the Academy or Council.

### V. ASSISTANT SECRETARY.

SECTION 1. The Assistant Secretary shall keep a list of the Resident Fellows ; issue notices of meetings, which for stated meetings shall be mailed on Saturday previous to the time of meeting ; assist the Recording Secretary in the discharge of his duties, and in his absence perform them.

SEC. 2. He shall keep a Register in which the signatures of the Fellows in attendance at each meeting shall be entered ; and, as soon as a quorum is thus ascertained to be present, notify the President.

### VI. CORRESPONDING SECRETARY.

The Corresponding Secretary shall take charge of and conduct the foreign correspondence of the Academy. He shall also report the death of each Corresponding and Honorary Fellow.

## VII. STATISTICAL SECRETARY.

The Statistical Secretary shall keep a tabular record of the names of every former and present Resident Fellow of the Academy, with their places and dates of birth, education, and graduation; and the date, place, and cause of death of each Fellow, with such other circumstances as will fully illustrate the vital statistics of the Academy. He shall report to the Academy, as early as practicable thereafter, the decease of each Resident Fellow, with such facts relating to his life and death as may be obtainable.

## VIII. TREASURER.

The Treasurer shall receive all dues, assessments, and proceeds from the sale of the Academy's publications, and retain the same until otherwise appropriated by the Council or Academy: pay all bills or sums directed by the Academy or Council, and none others; keep a correct account of all money received and expended; give a statement of all the funds of the Academy in his care to the Council or Academy annually, and whenever requested by either; have his books ready for inspection whenever they may request it, and deliver up, when called upon by the Council or Academy, all money, papers, books, and whatever may be in his possession belonging to the Academy to his successor in office, or to any other person appointed to receive them. He shall send out the bills for annual dues and assessments by mail in January. He shall report to the Trustees in February the names of all Fellows who are one year or more in arrear of dues, and shall have power to employ a Book-keeper subject to the approval of the Council, and a Collector when necessary.

## IX. BOARDS AND COMMITTEES.

SECTION 1. The Council, the Trustees, the Standing Committees, and the Sections, shall meet in January to organize, and as often thereafter as may be necessary, to transact the business referred to them by the Academy, and shall keep regular minutes of their proceedings, recorded in suitable books provided for the purpose.

SEC. 2. They shall, in addition to such duties as are herein after assigned to them, respectively consider all matters particularly assigned to them, and report thereon.

**SEC. 3.** When any member of a Standing Committee, the Council, or of the Trustees, shall be absent four consecutive stated meetings, without satisfactory excuse, such absence shall be reported to the President, who shall declare the seat vacant.

**SEC. 4.** If an officer shall fail to discharge his duties to the satisfaction of the Academy, he may be dismissed from his office by a two-thirds vote ; but no motion for dismissal shall be acted upon until the next stated meeting, prior to which meeting the Recording Secretary shall notify the alleged delinquent of such motion.

**SEC. 5.** Every member of a committee, or Fellow, having funds or property belonging to the Academy, shall give up the same on demand to the person authorized to receive it.

#### X. COUNCIL.

**SECTION 1.** The Council shall supervise the general affairs and interests of the Academy, and provide suitable accommodations for its meetings, for its movable property, and for its business transactions.

**SEC. 2.** They shall estimate for any annual assessment, and shall annually, in December, and oftener if deemed requisite, audit the financial accounts.

**SEC. 3.** They shall authenticate and authorize the payment of every bill against the Academy not exceeding one hundred dollars.

**SEC. 4.** They shall confer with the Trustees, the other officers, and with the Standing Committees, through the chairman of each, in reference to their respective functions and business relations.

**SEC. 5.** They shall appoint the Librarian, and the Assistant and Statistical Secretaries.

**SEC. 6.** They shall nominate such Fellows as are to be appointed to deliver series of discourses or lectures on scientific subjects before the Academy, and, also, a Fellow to deliver the Anniversary Discourse.

**SEC. 7.** They shall determine the propriety of reading any paper offered by a person not a Fellow of the Academy.

**SEC. 8.** They shall select, by a two-thirds vote, such essays, memoirs, or reports as are to appear in the printed transactions ; superintend the publication of all papers and volumes by the Academy, and fix the price of all publications offered for sale.

SEC. 9. They shall appoint all delegates to other societies, except those to the Medical Society of the State of New York.

SEC. 10. They shall, by a two-thirds vote, fill all vacancies until the next annual election, except in the offices of President, Vice-president, Trustees, and Delegates to the Medical Society of the State of New York, which shall be filled by the Academy for the unexpired portion of such term.

SEC. 11. They shall once annually, make a full report to the Academy.

SEC. 12. A majority of the Council shall be necessary to constitute a quorum.

#### XI. TRUSTEES.

SECTION 1. The Trustees shall have charge of all the real estate that now is in or that may at any time come into the possession of the Academy.

SEC. 2. It shall be their duty to supervise and direct their Treasurer in the investment of the funds of the Academy; report the investments and the condition of the funds and property aforesaid to the Council when required, and annually to the Academy. All funds and property in their care shall only be used as specified by the donors, and as provided for by the amended charter. No money shall be paid except on the order of the Trustees. All checks and all orders withdrawing deposits from any bank, trust company, or money institution, shall be signed by both the Treasurer for the Trustees and the Chairman of the Trustees.

SEC. 3. They shall ascertain at the first meeting in February of each year the names of all Fellows who are one year or more in arrear of dues, and shall immediately notify them of the fact. They shall within six months thereafter report to the Academy the names of all persons so notified, and whose dues remain unpaid.

#### XII. TREASURER FOR THE TRUSTEES.

SECTION 1. The Treasurer for the Trustees shall hold in trust all funds, papers, and documents of a financial nature now in the care of the Trustees or that may hereafter come under their control. The said funds shall be invested, and the papers and documents kept in a place of safety, under the direction of the Trustees.



SEC. 2. He shall collect the rents, interest, and income of the trusts and property of the Academy, and shall keep a separate account of the rents and each specific fund. .

SEC. 3. He shall annually, and whenever directed, make a full report of all matters entrusted to him ; the amounts and kind of investments, the receipts and payments of each trust, to the Trustees, to be audited by them for presentation to the Council and Academy, and whenever directed by either of the above bodies.

SEC. 4. He shall deliver up to his successor in office, to the Trustees, or to the Academy, when directed by either, all books, financial papers, funds, bonds, and whatever property he may hold in trust belonging directly or indirectly to the Academy.

SEC. 5. He shall be, *ex officio*, a member and attend the meetings of the Board of Trustees, but have no vote.

#### XIII. COMMITTEE ON ADMISSIONS.

SECTION 1. Each candidate for Resident Fellowship must make a written application, endorsed by three Fellows personally acquainted with him, and may be admitted at a meeting subsequent to his recommendation by the Committee, provided his name has been four weeks before the Academy and duly announced on the notice. The recommendation of Corresponding, Honorary, and Non-Resident Fellowships from the Army or Navy, or Benefactors, must be made in writing by three Resident Fellows, referred to the Committee, and take the same course as for Resident Fellowship.

SEC. 2. Admissions to Fellowship must be by a three-fourths vote of the Resident Fellows present at a stated meeting.

SEC. 3. The Committee on Admissions, upon receiving a duly endorsed application for admission to Fellowship, with the professional credentials, shall make due inquiry concerning the candidate, and all information thus obtained shall be confidential. They shall report within three months, such as may be deemed worthy of admission ; which report, if for Resident Fellowship, shall specify the source whence the candidates derived their diploma or license to practise, with the dates thereof. Should this committee fail to report within the time Specified upon any application submitted to them, any Fellow

may renew the application directly to the Academy, and a vote shall be taken upon it ; in this case, however, the affirmative vote of four-fifths of the Resident Fellows present, as ascertained by ballot, shall be requisite to insure an admission ; and on the question being put, it shall be distinctly stated by the President that the application has not been approved by the committee on admissions.

#### XIV. COMMITTEE ON MEDICAL ETHICS.

SECTION 1. It shall be the duty of the Committee on Ethics : To take notice of all patent and public breaches of medical ethics ; to call the attention of Fellows offending to the fact of such breach ; to receive notices of offences from any Fellow of the Academy ; to use all reasonable means to have offences against the ethics remedied before appealing to the Academy for discipline ; and finally, if necessary, to lay charges before the Academy.

SEC. 2. It shall be deemed a chargeable offence to countenance, encourage, or patronize—by advertising, giving certificates, or in any other way whatever—an irregular practitioner, or the proprietor or vender of any nostrum, patent or quack medicine ; or to commit any act which unfavorably affects the character of the Medical Profession.

#### XV. COMMITTEE ON LIBRARY.

SECTION 1. The Committee on Library shall have a general supervision of the Library of the Academy, and shall annually report upon its condition, at which time they shall also furnish to the Academy a statement of the amount necessary to meet the estimated wants of the Library during the ensuing year, when such an appropriation, based upon such estimate, shall be made by the Academy as may be deemed compatible with the state of its funds. The expenditure of such funds shall be made by the Librarian, under the direction of the Committee on Library.

SEC. 2. The Librarian shall be nominated by the Committee on Library, and shall be, *ex officio*, a member of that Committee, but have no vote.

SEC. 3. He shall have charge of all the books, manuscripts, anatomical or pathological specimens, apparatus, instruments, portraits, medals, coins, and other scientific property of the

Academy, and shall attend to their preservation, arrangement, and cataloguing. He shall fix to each donation the name of the donor. He may sell the publications of the Academy at the price established by the Council, and shall pay the proceeds to the Treasurer.

SEC. 4. He shall, as soon as practicable after the receipt of additions to the library, make such arrangements as shall enable them to be consulted in the library under such regulations as the Committee on Library shall adopt. He shall report at each stated meeting of the Academy such donations to the library as may have been received since the preceding meeting

SEC. 5. Duplicate books, pamphlets or periodicals, may be taken out by the Fellows and Benefactors of the Academy, for their use only, subject to the rules and regulations made by the Committee on Library, and approved by the Council.

SEC. 6. No books or periodicals, except duplicates, shall be taken from the Library rooms, unless when required by the Academy during its sittings, and then with the knowledge of the Librarian or his Assistant.

SEC. 7. The Library shall be open to the public, and the Librarian or his Assistant shall be present in the Library from 9 A. M. to 9 P. M., Sundays and legal holidays excepted.

#### XVI. SECTIONS.

SECTION 1. Every newly admitted Resident Fellow shall indicate to the President the section or sections to which he wishes to be assigned, and he may be so assigned by the President, subject to a change by the Academy.

SEC. 2. The Sections shall bring before the Academy at its stated meetings, or as otherwise ordered, such matters as pertain to the several departments respectively assigned to them, as subjects for discussion, or other action. They shall severally examine and report on all papers, documents, instruments, apparatus, etc., submitted to them, and give a brief abstract of the proceedings of the Sections. They shall each furnish a paper or prepare a discussion for a stated meeting of the Academy once every year.

#### XVII. ELECTIONS.

SECTION 1. At the stated meeting previous to the annual election the President shall appoint three Resident Fellows,

who, together with the Assistant Secretary, shall receive the ballots, and record the names of all the voters.

SEC. 2. The Recording Secretary shall cause the names of all the nominees for each office to be printed on slips, two copies of which, together with a copy of this by-law, shall be sent to each Fellow with the notice of the election.

SEC. 3. All the officers shall be elected by ballot, and by a majority of the Resident Fellows present and voting.

SEC. 4. The poll shall be opened immediately after the reading of the minutes on the evening of the election, and shall be kept open one hour, at the end of which time it shall be declared closed, and no votes shall thereafter be received. All the officers voted for shall be on one ballot.

SEC. 5. No Fellow whose annual dues remain unpaid shall be entitled to a vote.

SEC. 6. At the close of the poll, the Inspectors shall immediately proceed to canvass the votes, and if upon their report it shall appear that no choice has been made in any one or more of the offices, a new balloting for such officers as are still to be elected shall take place, the poll for which shall be kept open until all present, who may desire it, have voted, but not longer than thirty minutes. At the second and each succeeding ballot, the name of the candidate having the fewest votes shall be withdrawn.

SEC. 7. Ballots folded in each other, blank votes, and votes cast for a Fellow not regularly nominated, shall be discarded.

#### XVIII. FUNDS AND PROPERTY.

SECTION 1. The securities, investments, and funds of the Academy shall not be disposed of, or transferred, in whole or in part, unless with the approval of the Council and by a two-thirds vote of the Resident Fellows present at a stated meeting of the Academy, and after notice given at a previous stated meeting; but bills for current or necessary expenses may be passed by a majority at a stated meeting without previous notice.

SEC. 2. No loan or investment of the funds shall be made except in United States, New York State and New York City bonds, or on bond and mortgage on improved real estate in the city of New York, not to exceed one-half the assessed value of said property.

SEC. 3. No money shall be borrowed by the Academy, except on a vote of three-fourths of the Resident Fellows present at a stated meeting, and after one month's notice.

SEC. 4. The real estate comprising the premises of the Academy may only be sold to purchase and secure a new location and premises; in which case the whole amount realized on said sale shall be appropriated to the payment of said purchase, and to bear the same relation or lien upon the new that it did upon the old or former premises. A vote of two-thirds of the Resident Fellows present at a stated meeting, and one month's notice at a previous stated meeting, shall be necessary to authorize such sale.

SEC. 5. No person whose fellowship has ceased, no Non-Resident, Corresponding or Honorary Fellow shall have a right, title, or claim to any portion of the funds or property of the Academy.

#### XIX. DUES AND ASSESSMENTS.

SECTION 1. Each Resident Fellow, on admission, shall pay an initiation fee of twenty-five dollars, which shall go to the general permanent fund.

SEC. 2. The annual dues of each Resident Fellow shall be ten dollars, payable in the month of January, but dues shall be remitted during the year in which fellowship is acquired.

SEC. 3. Any Resident Fellow who is qualified to vote at an annual election, and has paid five annual dues, may compound for all future annual dues by the payment at one time of one hundred dollars. All sums of money so paid for composition fees in lieu of annual dues shall be added to the general permanent fund, but the interest may be used for current expenses.

SEC. 4. Any Fellow neglecting to pay his dues for one or more years shall be liable to forfeit his fellowship. If one month after he has received notice of his delinquency from the Trustees, his dues still remain unpaid, he shall then be summoned by the Recording Secretary to appear before the Academy, after one week's notice, to show cause why his name should not be stricken from the roll of Fellows; and, upon his failure to do so, it shall be submitted to a vote. If the majority of the votes cast are in the affirmative, the President shall declare the fellowship forfeited, and his name shall be erased from the roll, and the fact recorded on the minutes.

**XX. SIGNING THE CONSTITUTION AND BY-LAWS.**

**SECTION 1.** Every duly elected Resident Fellow shall sign the Constitution and By-Laws within two months after election, and, in default thereof, such election shall be deemed void, unless a reason satisfactory to the Council be given.

**SEC. 2.** No one elected a Resident Fellow shall be entitled to the rights and privileges of fellowship until the initiation fee shall have been paid, and the Constitution and By Laws signed.

**XXI. NON-RESIDENT FELLOWS AND GUESTS.**

**SECTION 1.** All Fellows not resident, distinguished physicians, and guests present at a meeting, shall be introduced to the President, and by him to the Academy, and their names entered on the minutes.

**XXII. MANUSCRIPTS, ESSAYS, AND PAPERS.**

**SECTION 1.** A copy of every Discourse, Memoir, or Paper read before the Academy, shall be kept in its archives by the Librarian.

**SEC. 2.** All Reports made to the Academy shall be written on paper of uniform size and quality, furnished by the Council, and shall be bound in successive volumes.

**SEC. 3.** A volume of Transactions shall be published under the supervision of the Council, when ordered by the Academy.

**SEC. 4.** Each Resident and Non-Resident Fellow shall be entitled to one copy, at cost price, of all publications of the Academy; Corresponding and Honorary Fellows, learned societies, public libraries, and scientific periodicals may receive a complimentary copy of the Transactions on approval of the Council.

**XXIII. ANNUAL REPORTS.**

**SECTION 1.** Each of the following named officers and committees of the Academy shall annually present full reports of their doings to the Council at its meeting in December:

1. Treasurer, audited.
2. Trustees,           “
3. Corresponding Secretary.
4. Statistical           “
5. Committee on Admissions.
6.       “               “ Ethics.
7.       “               “ Library.

**SEC. 2.** All reports shall be duly signed, and, with the report of the Council, shall be read by the Recording Secretary at the first stated meeting of the Academy in January.

**XXIV. RULES OF ORDER.**

**SECTION 1.** The following shall be the order of business at stated meetings :

**1. Reading of the Minutes.**

At the First Meeting in December, the Nomination of Officers.

At the First Meeting in January, the Annual Election and the reading of Annual Reports.

**2. Report of Council.**

**3.    "    " Trustees.**

**4.    "    " Committee on Admissions.**

**5. Admission of new Fellows.**

**6. Report of Corresponding Secretary.**

**7.    "    " Statistical        "**

**8.    "    " Committee on Library.**

**9. Reports of Sections in their order.**

**10.    "    by leave,**

**11. Reading of Papers and Discourses.**

**12. Appointed Debates and Discussions.**

**13. Unfinished Business.**

**14. New Business.**

**SEC. 2.** When a question is under debate, no motion shall be received, other than to adjourn; to lay on the table; for the previous question; to postpone; to refer; or to amend; which several motions shall have precedence in the order in which they are here arranged. The first three shall be decided without debate.

**SEC. 3.** When a blank is to be filled, the question shall be first taken on the highest number, the greatest sum, or longest time proposed.

**SEC. 4.** Any Fellow may call for a division of a question when the sense will admit it.

**SEC. 5.** The yeas and nays on any question, when called for by five Fellows present, shall be taken without debate and recorded on the minutes.

**SEC. 6.** No Fellow shall have the privilege of speaking more than once on any question under consideration, except by permission of the Academy.

**SEC. 7.** Any Fellow called to order while speaking, shall take his seat, and the debate shall be suspended until the point of order is settled.



SEC. 8. All questions of order shall be decided by the Chair, subject to an appeal, which shall be determined by a vote, and without debate.

SEC. 9. All resolutions and amendments shall be offered in writing, when required.

SEC. 10. All questions of order, not provided for by these rules, shall be determined by parliamentary usage as expounded by Cushing's Manual.

#### XXVI. ALTERATION OF BY-LAWS.

These By-Laws may be suspended by unanimous vote at a stated meeting. They may be repealed or amended by a three-fourths vote, provided notice of the same has been given in writing at a previous stated meeting, and also announced on the notice for the meeting when action is to take place.



NEW YORK ACADEMY OF MEDICINE.

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CHARTER, CONSTITUTION AND BY-LAWS,  
AND LIST OF FELLOWS.

February, 1880.



ACT OF INCORPORATION,  
CONSTITUTION AND BY-LAWS,  
AND  
LIST OF FELLOWS  
OF THE  
NEW YORK ACADEMY OF MEDICINE.  
INSTITUTED 1847.



NEW YORK:  
19 WEST THIRTY-FIRST STREET.  
PRINTED FOR THE ACADEMY,  
FEBRUARY, 1880.

**PUBLICATION COMMITTEE.**

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**SAMUEL S. PURPLE, M.D.**

**GOUVR. M. SMITH, M.D.**

## PREFATORY NOTE.

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THE NEW YORK ACADEMY OF MEDICINE was organized in the city of New York, on the 6th day of January, 1847, and by a special act of the Legislature of the State was incorporated on the 23d day of June, 1851. This act was amended on the 4th day of June, 1853, empowering the corporators to appoint five delegates to represent them in the State Medical Society, with all the powers and privileges possessed by delegates from the respective medical colleges of the State. A supplementary act was passed, June 2, 1877, conferring upon the Academy certain trust powers and privileges.

From the inception of the Academy, one of its chief purposes has been the procurement of a building or hall, where its meetings might be held, where a library and museum could be garnered, and where the profession could meet on common ground. The efforts put forth in this direction culminated, in 1875, in the purchase of a commodious building, centrally located on West Thirty-first Street, between Broadway and Fifth Avenue, which has, by the generous gift of a worthy benefactor, been enlarged so as to cover the entire lot, thereby providing a Library Hall and audience-room, which will, for some time, answer the Academy's wants and those of the profession. The regular meetings are held here on the first and third Thursday evenings in the month (except July and August), at eight o'clock.

The Academy's publications comprise five volumes of "Transactions," four volumes of the "Bulletin," and some fifty

miscellaneous "Addresses," "Memoirs," "Reports," etc. All of these publications are for sale, or will be exchanged for works not already in the Library. The Library now contains fifteen thousand volumes, and is open free to the profession and the public daily (Sundays and legal holidays excepted), from 9 A.M. to 6 P.M., and from 7 to 9 P.M.

By virtue of its Charter the following funds, held in trust by the Board of Trustees, have been initiated :

#### GENERAL PERMANENT FUND.

This fund will enable the Academy to anticipate the necessities for enlarged and better accommodations, which in time must be demanded of it.

#### LIBRARY FUND.

The interest arising from the careful investment of this fund will be used for the purchase of such books as are needed, and which are not likely to come into the Library by gift.

#### FUND FOR LIQUIDATION OF THE MORTGAGE.

This fund will be used solely for the liquidation of the mortgage now on the property of the Academy—the necessity of cancelling which presents strong claims to the attention of the Fellows and friends of the Academy.

Donations and bequests are solicited by the New York Academy of Medicine for each of the above funds.

12 WEST THIRTY-FIRST STREET,

*February 21, 1880.*



# AN ACT.

## TO INCORPORATE THE NEW YORK ACADEMY OF MEDICINE

Passed June 28, 1851.

*The People of the State of New York, represented in Senate and Assembly, do enact as follows :*

SECTION 1. J. Kearny Rodgers, James Anderson, Galen Carter, Willard Parker, John H. Griscom, Edward L. Beadle, Isaac<sup>d</sup> Wood, James O. Pond, and John G. Adams, and such other persons as are now associated as the New York Academy of Medicine, or may hereafter become associated with them, are hereby constituted a body corporate, by the name of

“THE NEW YORK ACADEMY OF MEDICINE,”

for the purpose of promoting the advancement of Medical Science by such means as to them shall appear expedient and proper.

SEC. 2. The said corporation shall have power to make and adopt a Constitution and By-Laws, rules and regulations for the admission, suspension, and expulsion of its members, and their government; the election of its officers, and define their duties; and for the safe-keeping and protection of its property and funds, and, from time to time, to alter or repeal such Constitution, By-Laws, rules, and regulations. The present officers shall hold their respective offices until others shall be chosen in their places.

SEC. 3. The said corporation may purchase and hold any real or personal estate, the annual income of which shall not exceed five thousand dollars.

SEC. 4. The said corporation shall possess the general powers, and be subject to the general restrictions and liabilities prescribed in the third title of the eighteenth chapter of the first part of the Revised Statutes.

SEC. 5. The incorporators hereby incorporated are authorized to appoint one delegate, to represent them in the State Medical Society, with all the powers and privileges which delegates for the respective Medical Colleges of this State possess.

SEC. 6. The Legislature may at any time alter or repeal this act.

*State of New York, Secretary's Office.*

I certify, that I have compared the foregoing with [L. s.] an original law on file in this office, and that the same is a correct transcript therefrom, and of the whole of said original.

Given under my hand and seal of office, at the city of Albany, this twenty-eighth day of June, one thousand eight hundred and fifty-one.

A. G. JOHNSON, *Dep. Sec. of State.*

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CHAP. 308.

AN ACT TO AMEND AN ACT ENTITLED "AN ACT TO INCORPORATE THE NEW YORK ACADEMY OF MEDICINE," *passed June 23, 1851.*

Passed June 4, 1853.

*The People of the State of New York, represented in Senate and Assembly, do enact as follows :*

SECTION 1. The fifth section of chapter two hundred and seventy-four of the Laws of eighteen hundred and fifty-one is hereby amended so as to read as follows :

SEC. 5. The Corporators hereby incorporated are authorized to appoint FIVE delegates to represent them in the State

Medical Society, with all the powers and privileges which delegates from the respective Medical Colleges of this State possess.

SEC. 2. This act shall take effect immediately.

CHAP. 375.

AN ACT TO CONFER CERTAIN POWERS AND PRIVILEGES UPON  
THE NEW YORK ACADEMY OF MEDICINE.

Passed June 2, 1877, three-fifths being present.

*The People of the State of New York, represented in  
Senate and Assembly, do enact as follows :*

SECTION 1. The present Board of Trustees of the New York Academy of Medicine, as now organized, consisting of five members, shall be continued, and on the expiration of the term of any of the said Trustees, a successor shall be elected, who shall hold his office for five years, and until his successor shall be elected.

SEC. 2. In case of the death or resignation of any Trustee during his term, his successor shall be elected for the residue of his term thus unexpired.

SEC. 3. On the expiration of the term of any of the said Trustees, a successor shall be elected who shall hold his office for five years, and until his successor shall be elected.

SEC. 4. The said Corporation may take and hold in trust any personal or real estate, either by purchase, gift, bequest, or devise, the annual income of which shall not exceed ten thousand dollars.

SEC. 5. Any property so purchased, given, bequeathed, or devised to the said Corporation, unless the use is otherwise specifically designated by the donor, shall be added to and

form a part of the general permanent fund held in trust by said Corporation, the interest or income of which shall only be used by the said Corporation for the purpose of advancing Medical Science under their direction, and any court of record may restrain any expenditure or misappropriation of such property, or any part thereof, on complaint of any three of the Fellows of the said "New York Academy of Medicine" qualified to vote at the annual election for Trustees.

SEC. 6. This act shall take effect immediately.

STATE OF NEW YORK,  
OFFICE OF THE SECRETARY OF STATE. } ss.

I have compared the preceding with the original law on file in this office, and do hereby certify that the same is a correct transcript therefrom, and of the whole of said original law.

Given under my hand and the seal of office of  
: ..... : the Secretary of State, at the City of Albany, this  
: L. S. : fourth day of June, in the year one thousand eight  
: ..... : hundred and seventy-seven.

JOHN BIGELOW, *Secretary of State.*

# CONSTITUTION.

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## ARTICLE I.

THIS Association shall be called the NEW YORK ACADEMY OF MEDICINE, and shall be composed of Resident, Non-Resident, Corresponding, and Honorary Fellows, and Benefactors.

## ARTICLE II.

The objects of the Academy shall be :

*First.* The cultivation of the Science of Medicine.

*Second.* The advancement of the character and honor of the Profession.

*Third.* The elevation of the standard of Medical Education.

*Fourth.* The promotion of the Public Health.

## ARTICLE III.

1. Each candidate for Resident Fellowship must have been a graduate or licentiate in medicine residing in this city and county, or in either of the counties of this State thereunto adjoining, for three years.

2. Surgeons of the Army and Navy may be admitted as Non-Resident Fellows, in the same manner as Resident Fellows.

3. Resident Fellows, removing permanently from the city or vicinity, may become Non-Resident Fellows by nomination and vote of the Academy.

## ARTICLE IV.

1. Nominations for Corresponding and Honorary Fellows must be made by three Fellows, and have the usual reference.

2. Corresponding Fellows must be men of eminence, actively engaged in the cultivation of Medical Science, and their number shall be limited to one hundred.

3. Honorary Fellows must be citizens of the United States, and have been long distinguished in their profession. Their number shall be limited to fifty.

## ARTICLE V.

SECTION 1. There shall be a President, three Vice-Presidents, a Recording Secretary, a Corresponding Secretary, a Treasurer, and five Trustees, and a Treasurer for the latter.

These officers, together with the chairmen of the standing committees, shall constitute a Council. There shall also be a Librarian, a Statistical and an Assistant Secretary, the latter to be nominated by the Recording Secretary, and all to be appointed by the Council.

SEC. 2. The President shall be elected for the term of two years; the Vice-Presidents for the term of three years, one retiring and one being elected each year; the Treasurer for the Board of Trustees for five years.

The Recording and Corresponding Secretaries and the Treasurer shall be elected for the term of three years; the Statistical Secretary and the Trustees for the term of five years (the former by the Council), one Trustee being elected and one retiring each year.

## ARTICLE VI.

SECTION 1. The following Standing Committees shall be elected for the term of five years by ballot, and shall consist of five members each, one member for each committee being elected and one retiring yearly; and they shall severally perform such duties as may be assigned to them:

1. A Committee on Admissions. 2. A Committee on Medical Ethics. 3. A Committee on Medical Education. 4. A Committee on Library.

Sec. 2. The Academy shall be divided into six sections, viz.: Section 1, Anatomy, Physiology, and Pathology. Section 2, Surgery. Section 3, Theory and Practice of Medicine. Section 4, Obstetrics and Diseases of Women and Children. Section 5, Chemistry, Pharmacy, Materia Medica, Therapeutics, and Botany. Section 6, Public Health, Legal Medicine, and Medical and Vital Statistics.

#### ARTICLE VII.

SECTION 1. Every Fellow shall be furnished with a duly authenticated certificate of fellowship, which may be revoked for cause; and in case of refusal to surrender the same, the Academy may publish such revocation in the public journals.

Sec. 2. Any Fellow, having complied with the requirements of the Constitution and By-Laws, may resign his fellowship, by presenting at a stated meeting a communication in writing to that effect.

Sec. 3. No resignation shall be valid until accepted by the Academy.

#### ARTICLE VIII.

The Academy reserves the right of punishing violations of its regulations, or of its code of Medical Ethics, by reprimand, suspension, or expulsion, and will recognize no Fellow as a regular practitioner who has been expelled.

#### ARTICLE IX.

No part of this Constitution shall be altered, except at a stated meeting, subsequent to one at which a proposition to that effect shall have been made in writing, and then only by a vote of three-fourths of the Resident Fellows present.



# BY-LAWS.

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## I. MEETINGS AND NOMINATIONS.

SECTION 1. The stated meetings of the Academy shall be held on the first and third Thursdays of every month, at 8 o'clock P.M., except when the regular day is the first of January or the fourth day of July.

SEC. 2. There shall be a recess from and after the first Thursday in July to the third Thursday in September of each year.

SEC. 3. The Anniversary Discourse shall be delivered in November.

SEC. 4. At the first stated meeting in December all nominations for the officers to be elected by the Academy shall be made. At the first stated meeting in January all Annual Reports shall be made.

SEC. 5. The Elections shall be held at the first stated meeting in January, except under extraordinary circumstances, when special provision may be made.

SEC. 6. Special meetings may be called at any time by the President upon the requisition, in writing, of any ten Resident Fellows.

SEC. 7. At all meetings, twenty-one Resident Fellows shall be necessary to constitute a quorum.

## II. THE PRESIDENT

Shall preside over all meetings, regulate all debates, call for reports, summon extraordinary meetings on urgent occasions, sign all diplomas, letters testimonial, and other documents requiring his signature, appoint all committees not otherwise

provided for, announce the result of all votes, introduce all Corresponding, Non-Resident, and Honorary Fellows, or distinguished members of the profession who may be present, designate one or more Fellows to prepare suitable memoirs of deceased Fellows, and be, *ex officio*, a member of all standing committees, and the Board of Trustees.

### III. VICE-PRESIDENTS.

The Vice-Presidents shall assist the President in the discharge of his duties, and in his absence preside in the order of rank.

### IV. RECORDING SECRETARY.

The Recording Secretary shall keep minutes of the proceedings of all meetings, notify officers and members of committees of their appointment and the duties required of them, sign diplomas, and certify to all official acts requiring certificates either in connection with or independently of the President, as the case may be; attest and affix the common seal to all diplomas, letters-testimonial, and other documents requiring the seal of the Academy and signature of the President; transmit to the Committee on Admissions all nominations for fellowship within one week after each stated meeting; receive the signatures and initiation fees of newly admitted Fellows, and pay the moneys thus received over to the Treasurer; be, *ex officio*, a member of the standing committees and of the Board of Trustees; and transact such other business in his department as may be ordered by the Academy.

### V. ASSISTANT SECRETARY.

SECTION 1. The Assistant Secretary shall keep a list of the Resident Fellows; issue notice of meetings, which shall be mailed on Saturday previous to the time of meeting; for special meetings three days' notice must be given, when practicable; assist the Recording Secretary in the discharge of his duties, and in his absence perform them.

SEC. 2. He shall keep a Register in which the signatures of the Fellows in attendance at each meeting shall be entered; and as soon as a quorum is thus ascertained to be present, notify the President.

#### VI. CORRESPONDING SECRETARY.

The Corresponding Secretary shall take charge of, and conduct, the correspondence of the Academy. He shall report the death of each Corresponding and Honorary Fellow, and prepare a Memoir to be read before the Academy.

#### VII. STATISTICAL SECRETARY.

The Statistical Secretary shall keep a tabular record of the names of every former and present Resident Fellow of the Academy, with their places and dates of birth, education, and graduation; their social condition, the number, names, and dates of birth and death of the family of each; also the date, place, and cause of death of each Fellow, with such other circumstances as will fully illustrate the vital statistics of the Academy. He shall report to the Academy, as early as practicable thereafter, the decease of each Fellow, with such facts relating to his life and death as may be obtainable.

#### VIII. TREASURER OF THE ACADEMY.

He shall receive all dues and assessments, and the proceeds from the sale of the Academy's publications, and retain the same until otherwise appropriated by the Council or Academy; he shall pay all bills or sums directed by the Academy or Council, and none others, keep a correct account of all money received and expended; have power to employ a person to collect the dues and assessments, give a statement of all the funds of the Academy in his care to the Council or Academy annually, and whenever requested by either; have his books ready for inspection whenever they may request it, and deliver up, when called upon by the Council or Academy, all moneys,

papers, books, and whatever may be in his possession belonging to the Academy to his successor in office, or to any other person appointed to receive them. He shall send a bill for annual dues and assessments by mail directly after the annual election. He shall report to the trustees every February the names of all Fellows who are one year in arrears of dues.

#### IX. BOARDS AND COMMITTEES.

SECTION 1. The Counsel, the Trustees, the Standing Committees, and the Sections, shall meet within two weeks after the annual election to organize, and as often thereafter as they please, or as may be necessary, to transact the business referred to them by the Academy, and keep regular minutes of their proceedings, which shall be recorded in suitable books provided for the purpose.

SEC. 2. They shall, in addition to such duties as are hereinafter assigned to them, respectively consider all matters particularly referred to them, and report thereon.

SEC. 3. When any member of a standing committee, the Council, or the Trustees, shall be absent four consecutive stated meetings, without satisfactory cause to said committee, etc., the same shall be reported to the President, who shall declare his seat vacant.

SEC. 4. If an officer shall fail to discharge his duties to the satisfaction of the Academy, he may be dismissed from his office by a two-thirds vote; but no motion for dismissal shall be acted upon until the next stated meeting; prior to which meeting the Recording Secretary shall notify the alleged delinquent of such motion.

SEC. 5. Every member of a committee, or Fellow, having funds or property belonging to the Academy, shall give up the same on demand, to the person authorized to receive it.

#### X. THE COUNCIL.

The Council shall supervise the general affairs and interests of the Academy; they shall provide suitable accommodations

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for its meetings, for its movable property, and for its business transactions; they shall estimate for the annual assessment, when at any time an increase thereof may be necessary; they shall annually, in December, audit the financial accounts, and oftener if deemed requisite; they shall authenticate and authorize the payment of all bills against the Academy not exceeding fifty dollars; they shall confer with the Trustees, the Treasurer, the other officers, and with the standing committees through the chairman of each, in reference to their respective functions and business relations; they shall appoint the Librarian, the Assistant and Statistical Secretaries; they shall nominate such Fellows as are to be appointed to deliver series of discourses or lectures on scientific subjects before the Academy, and also a Fellow to deliver the Anniversary Discourse; they shall determine the propriety of the reading of any paper offered by any person not a Fellow of the Academy; they shall select and recommend to the Academy for publication from the archives such essays, memoirs, or reports, as are to appear in the printed Transactions. All papers published in the Transactions shall be by a two-thirds vote of the members present. They shall fix the prices of all publications offered for sale; they shall, by a two-thirds vote, fill all vacancies until the next annual election, except of the President, Vice-Presidents, and the Trustees, which shall be filled by the Academy; they shall appoint all delegates to other societies when admissible; they shall superintend the printing and publication of all papers and volumes ordered by the Academy; and they shall once a year report in full to the Academy. A majority of the Council shall be necessary to constitute a quorum.

#### XI. BOARD OF TRUSTEES.

SECTION 1. They shall have charge of all the real estate that now is in, or that may at any time come into the possession of the Academy.

SEC. 2. It shall be their duty to supervise and direct their Treasurer in the investment of the funds of the Academy;

report the investments and the condition of the funds and property aforesaid to the Council when required, and annually to the Academy. All funds and property in their care shall only be used as specified by the donors, and as provided for by the amended charter. No money shall be paid except on the order of the Board. All checks, and all orders withdrawing deposits from any bank, trust company, or money institution, shall be signed by both the Treasurer of the Board of Trustees and the Chairman of the Board of Trustees.

SEC. 3. They shall ascertain at the first meeting in February of each year the names of all Fellows who are one year in arrears of dues, and shall immediately notify all such of the fact, and shall within six months thereafter report to the Recording Secretary the names of all persons who have forfeited their fellowship by non-payment of dues.

## **XII. TREASURER OF THE BOARD OF TRUSTEES.**

SECTION 1. He shall hold in trust all funds, papers and documents of a financial nature now in the care of the trustees, or that may hereafter come under their control; the said funds shall be invested and the papers and documents kept in a place of safety under the direction of the Board of Trustees.

SEC. 2. He shall collect the rents, interest and income of said trusts and property of the Academy. He shall keep a separate account of the rents, the general permanent, and each specific fund.

SEC. 3. He shall annually make a full report of all matters entrusted to him; the amounts and kind of investments, the receipts and payments of each trust, to the Board of Trustees, to be audited by them for presentation to the Council and Academy; and whenever requested by either of the above bodies.

SEC. 4. He shall deliver up to his successor in office, to the Trustees or to the Academy when requested by either, all books, financial papers, funds, and bonds, and whatever prop-

erty he may hold in trust belonging directly or indirectly to the Academy.

SEC. 5. He shall be *ex officio* a member and attend the meetings of the Board of Trustees, but have no vote.

#### XIII. COMMITTEE ON ADMISSIONS.

SECTION 1. Each candidate for Resident Fellowship must be proposed in writing by three Fellows personally acquainted with him, and may be admitted at a meeting subsequent to his recommendation by the Committee. The recommendation of Corresponding, Honorary, and Non-Resident Fellowships from the Army and Navy, must be at least one month before the Academy before the candidate can be admitted.

SEC. 2. Admissions to Fellowship must be by a three-fourths vote of the members present at a stated meeting.

SEC. 3. The Committee on Admissions, upon receiving from the Recording Secretary the names of the candidates proposed for Fellowship, with their professional credentials, shall make due inquiry concerning them, and all information thus obtained shall be confidential; they shall report within three months such as may be deemed worthy of admission; which report, if for Resident Fellowship, shall specify the source whence the nominees derived their diploma or license to practise, with the dates thereof; and should this committee fail to report within the time specified upon any nomination submitted to them, any Fellow having made such a nomination may renew the same directly to the Academy, and a vote shall be taken upon it; in this case, however, the affirmative vote of four-fifths of the Fellows present, as ascertained by ballot, shall be requisite to insure an admission; and on the question being put, it shall be distinctly stated that the nomination has not been approved by the committee.

#### XIV. COMMITTEE ON MEDICAL ETHICS.

SECTION 1. The Committee on Medical Ethics shall hear all complaints of violation of medical ethics on the part of any



Fellow, and decide all questions of medical ethics submitted to them by the Academy. They shall also notify to appear before them any Fellow of the Academy against whom any charge may have been preferred, and furnish him with a copy of the same; his accuser being also cited to appear, the committee shall proceed to take testimony and hear the defence, reserving their decision to be reported to the Academy at the next stated meeting, when their action may be affirmed by a majority of the Fellows present; but the vote of three-fourths shall be required to reverse the decision of the committee.

SEC. 2. Every charge against a Fellow of the Academy shall be made by a Fellow, and addressed to the Recording Secretary, under a sealed cover, with the words, "Charge against a Fellow," written upon it. The reception of such paper shall be announced to the Academy by the Secretary, who, after designating it by a number, shall hand the same over to the Committee on Medical Ethics.

SEC. 3. It shall be deemed a chargeable offence to countenance, encourage, or patronize—by advertising, giving certificates, or in any other way whatever—an irregular practitioner, or the proprietor or vender of any nostrum, patent or quack medicine; or to commit any act which unfavorably affects the character of the Medical Profession.

SEC. 4. A three-fourths vote of the Fellows present shall be necessary to expel a member.

SEC. 5. All questions of Ethics in other respects shall, as far as applicable, be adjudged in accordance with the Code of Ethics promulgated by the American Medical Association and adopted by the Academy.

#### XV. COMMITTEE ON MEDICAL EDUCATION.

The Committee on Medical Education shall have cognizance of the systems of medical instruction, private and public, in this city and State, as compared with such as are elsewhere in use. They shall recommend such improvements in office training and office examinations, in text-books, in read-

ing, and in practical studies proper for the student, and in the public courses, theoretical and practical, at the colleges and hospitals, as may seem to them in keeping with the advances of medical knowledge and the exigencies of the profession. They shall notice any evasion or infringement of the laws of this State that may come to their knowledge in reference to the granting of degrees. They shall make, in other respects, such suggestions as seem to them worthy of attention for rendering our systems of medical education thorough, efficient, and satisfactory. They shall report at least once a year to the Academy.

#### XVI. COMMITTEE ON LIBRARY.

SECTION 1. The Committee on Library shall have a general supervision of the Library of the Academy, and shall report upon its condition annually at the first stated meeting in January, at which time they shall furnish to the Academy a statement of the amount necessary to meet the estimated wants of the Library during the ensuing year, when such an appropriation, based upon such estimate, shall be made by the Academy as may be deemed compatible with the state of its funds. The expenditure of such funds shall be made by the Librarian, under the direction of the Committee on Library.

SEC. 2. The Librarian shall be nominated by the Committee on Library, and shall be ex-officio a member of that Committee, but have no vote.

SEC. 3. The Librarian shall have charge of all the books, manuscripts, anatomical or pathological specimens, apparatus, instruments, portraits, medals, coins, and other scientific property of the Academy, and shall attend to their preservation, arrangement, and cataloguing. He shall fix to each donation the name of the donor. He may sell the publications of the Academy at the price affixed by the Council, and shall pay the proceeds half-yearly to the Treasurer. He, or his Assistant, shall attend in the Library from 9 A.M. to 6 P.M., and from 7 to 9 P.M., daily, Sunday and legal holidays excepted.

SEC. 4. It shall be the duty of the Librarian, as soon as

practicable after the receipt of the professional journals and new publications generally, to make such arrangements as shall enable the Fellows to consult the same in the Library of the Academy, under such regulations as the Committee on Library shall adopt, and to report at each stated meeting of the Academy such donations to the Library as may have been received since the preceding meeting.

SEC. 5. No books, except duplicates, shall be taken from the Library rooms, unless when required in the Academy during its sittings, and then with the knowledge of the Librarian.

SEC. 6. Duplicate books, pamphlets, and periodicals, and periodicals of the current year, excluding the last number, may be taken out by the Fellows and Benefactors of the Academy, subject to the rules and regulations made by the Committee on Library, provided such rules and regulations have been approved by the Council.

SEC. 7. The Library and Museum shall be open to the public.

#### XVII. SECTIONS.

SECTION 1. Every newly-admitted Resident Fellow shall be assigned to a Section by the President, subject to a change by the Academy.

SEC. 2. The Sections shall bring before the Academy at its stated meetings, or as otherwise ordered, such matters as pertain to the several departments respectively assigned to them, as subjects for discussion, or other action. They shall severally examine and report on all papers, documents, instruments, apparatus, etc., submitted to them, and give a brief abstract of cases reported in the Sections. They shall severally appoint each year two or more Fellows to read original papers before the Academy, also present two topics for discussion.

#### XVIII. ELECTIONS.

SECTION 1. At the stated meeting previous to every annual election the President shall appoint two Fellows, who, together

with the Assistant Secretary, shall constitute a Board of Inspectors, to receive the ballots, and the latter of whom shall record the names of all the voters. The poll shall be opened immediately after the reading of the minutes, on the evening of the election, and shall be kept open one hour, at the end of which time it shall be declared closed, and no votes shall thereafter be received. All the officers voted for shall be on one ballot. The Recording Secretary shall cause the names of all the nominees for each office to be printed on slips, two copies of which, together with a copy of this by-law, shall be sent to each Fellow with the notice of the election. No Fellow whose annual dues remain unpaid shall be entitled to a vote.

SEC. 2. At the close of the poll, the Inspectors shall immediately proceed to canvass the votes, and if no choice shall have been made in any one or more of the officers, a new balloting for such officers as are still to be elected shall forthwith take place, the poll for which shall be kept open until all present, who may desire it, have voted, but not longer than thirty minutes. At the second and each succeeding ballot, the name of the candidate having the fewest votes shall be withdrawn.

SEC. 3. All the officers shall be elected by ballot, and by a majority of the Fellows present.

SEC. 4. Ballots folded in each other, blank votes, and votes cast for a Fellow not in regular nomination, shall be discarded.

#### XIX. FUNDS AND PROPERTY.

SECTION 1. The securities, investments, and funds of the Academy shall not be disposed of, or transferred, in whole or in part, unless by approval of the Council and by a two-thirds vote of the Fellows present at a stated meeting of the Academy, and after notice given at a previous stated meeting; but bills for current or contingent expenses may be passed, by a majority at a stated meeting, without previous notice.

SEC. 2. No loan or investment of the funds shall be made except in United States, New York State, and New York City bonds, or on bond and mortgage on improved real estate in the city of New York, not to exceed one-half the assessed value of said property. No Fellow whose fellowship has been vacated shall have a right, title, or claim to any portion of the funds or property of the Academy. No money shall be borrowed by the Academy, except on a vote of three-fourths of the Fellows present at a stated meeting, and after one month's notice.

SEC. 3. The real estate comprising the premises of the Academy may only be sold to purchase and secure a new location and premises; in which case the whole amount realized on said sale shall be appropriated to the payment of said purchase, and to bear the same relation or lien upon the new that it did upon the old or former premises. A vote of two-thirds of the Fellows present at a stated meeting, and one month's notice at a previous stated meeting, shall be necessary to authorize such sale.

#### XX. DUES AND ASSESSMENTS.

SECTION 1. Each Resident Fellow, on admission, shall pay an initiation fee of twenty dollars.

SEC. 2. The annual dues of each Resident Fellow shall be ten dollars, payable in the month of January in each year; or any Resident Fellow who is qualified to vote at an annual election, and has attained the age of thirty years, and has paid five annual dues, may compound for all future annual dues by one payment of one hundred and fifty (\$150.00) dollars; any Fellow so qualified, and has attained the age of thirty-five years, and has paid five or more annual dues, may compound for all future annual dues by one payment of one hundred and forty-five (\$145.00) dollars; any Fellow so qualified, and has attained the age of forty years, and has paid five or more annual dues, may compound for all future annual dues by one payment of one hundred and thirty-five (\$135.00) dollars; any

Fellow so qualified, and has attained the age of forty-five years, and has paid five or more annual dues, may compound for all future annual dues by one payment of one hundred and twenty-five (\$125.00) dollars; any Fellow so qualified, and has attained the age of fifty years, and has paid five or more annual dues, may compound for all future annual dues by one payment of one hundred and fifteen (\$115.00) dollars; any Fellow so qualified, and has attained the age of fifty-five years, and has paid five or more annual dues, may compound for all future annual dues by one payment of one hundred and five (\$105.00) dollars; any Fellow so qualified, and has attained the age of sixty years, and has paid five or more annual dues, may compound for all future annual dues by one payment of ninety-five (\$95.00) dollars; any Fellow so qualified, and has attained the age of sixty-five years, and has paid five or more annual dues, may compound for all future annual dues by one payment of eighty (\$80.00) dollars; and any Fellow so qualified, and has attained the age of seventy years, and has paid five or more annual dues, may compound for all future annual dues by one payment of sixty-five (\$65.00) dollars. All sums of money so paid for composition fees in lieu of annual dues shall be added to the general permanent fund, but the interest may be used for current expenses. Any assessment made by order of the Academy shall be payable within two months after the same is ordered.

SEC. 3. Any Fellow neglecting to pay his dues for one or more years shall forfeit his Fellowship, provided he shall have received one month's notice of his delinquency from the Trustees. He shall then be summoned by the Recording Secretary to appear before the Academy after one week's notice, to show cause why his name should not be stricken from the roll of Fellows for the non-payment of dues; and failing to do so, it shall be submitted to a vote, and if sustained, the President shall then declare his Fellowship forfeited, and his name be erased from the roll, and the same be recorded on the Minutes.

SEC. 4. Any Fellow, by the payment of one thousand dollars



or more into the Treasury of the Academy, shall receive the title—Benefactor.

SEC. 5. Any respectable graduate in medicine, or any respectable layman, upon approval by the Academy, shall receive the title, Benefactor, by the payment of one thousand dollars or more into the Treasury of the Academy.

#### XXI. SIGNING THE CONSTITUTION AND BY-LAWS.

SECTION 1. Every duly admitted Resident Fellow shall affix his signature to the Constitution and By-Laws within two months after his election ; and in default thereof, said election shall be deemed void, unless a satisfactory excuse be given ; nevertheless, he may be renominated and re-elected.

SEC. 2. No one admitted a Resident Fellow shall be entitled to the rights and privileges of fellowship until he shall have paid his initiation fee and signed the Constitution and By-Laws.

#### XXII. INVITED GUESTS.

SECTION 1. Any Resident Fellow may invite his professional friends to attend the meetings of the Academy ; and all Fellows not resident, distinguished physicians, or invited guests, present at a meeting, shall be introduced to the President, and by him to the Academy, and their names entered on the Minutes.

SEC. 2. Any Fellow may, through the Chair, call on other Fellows, or upon invited guests, for the expression of their views and opinions on subjects under consideration.

#### XXIII. MANUSCRIPTS, ESSAYS AND PAPERS.

SECTION 1. A copy of every Discourse, Memoir, or Medical Paper read before the Academy, shall be kept in its archives by the Librarian.

SEC. 2. All Memoirs of deceased Fellows shall be written on paper of uniform size and quality, furnished by the Council, and shall be bound in successive volumes for future reference.



SEC. 3. An annual volume of Transactions of the Academy shall be published under the supervision of the Council.

SEC. 4. All papers read before the Academy shall be referred to the Council, unless the author shall elect otherwise. All matters for publication emanating from the Sections shall have the same reference.

SEC. 5. The Council, at its first meeting after a paper or memoir read before the Academy or its Sections has been referred to it, shall decide whether it shall or shall not be published in the Transactions.

SEC. 6. An author may publish his paper elsewhere than in the "Transactions" of the Academy, as having been read before the Academy; but, in that case, should the Council also decide to publish the same, no extra copies will be afforded him at the expense of the Academy.

SEC. 7. Of each paper published at length, by the Academy alone, thirty extra copies may be printed for the author at the expense of the Academy.

SEC. 8. To secure the prompt publication of papers, a copy of each shall be handed to the Secretary immediately, or within five days after it is read. A failure to comply with this requirement may prevent the publication of the paper *in extenso* by the Academy, though the Council may at its option decide to print an abstract of it. The Secretary shall remind the reader of the paper of the preceding regulation before the adjournment of the meeting at which it is read.

SEC. 9. Each Resident and Non-Resident Fellow shall be entitled to one copy, at cost price, of all the publications of the Academy printed during the time he is a Fellow in good standing; each Corresponding and Honorary Fellow and distinguished members of the profession, and learned societies at home and abroad, may receive a complimentary copy of the Transactions.

#### XXIV. ANNUAL REPORTS.

SECTION 1. The following departments of the Academy shall present full reports annually of their doings to the Council, at



its meeting in December of each year, written on uniform paper to be furnished by the Council :

1. Treasurer, audited.
2. Trustees, “
3. Recording Secretary.
4. Corresponding Secretary.
5. Statistical Secretary.
6. Committee on Admissions.
7. “ “ Ethics.
8. “ “ Education.
9. “ “ Library.
10. The Several Sections.

All shall be signed by their respective officers, and with the report of the Council shall be read by the Recording Secretary or otherwise, at the first meeting in January of each year.

Sec. 2. All special committees shall write their reports on uniform paper as above, which shall be bound into a volume as soon as sufficient shall have been accumulated, and placed in the archives of the Academy.

#### XXV. RULES OF ORDER.

SECTION 1. The following shall be the order of business at the stated meetings :

1. Reading the Minutes.
2. At the First Meeting in December, the Nominations of Officers.  
At the First Meeting in January, the Annual Election, and the reading of Annual Reports.
3. Report of Committee on Admissions.
4. Admission of new Fellows.
5. Reports of Sections in their order.
6. Reports by leave.
7. Reception of Professional and Scientific Intelligence.
8. Reading of Papers and Discourses.
9. Appointed Debates and Discussions.
10. Unfinished Business.
11. New Business.

Sec. 2. When a question is under debate, no motion shall be received, but to adjourn ; to lay on the table ; for the previous question ; to postpone ; to refer ; or to amend ; which

several motions shall have precedence in the order in which they are here arranged. The first three shall be decided without debate.

SEC. 3. When a blank is to be filled, the question shall be first taken on the highest number, the greatest sum, or longest time proposed.

SEC. 4. Any Fellow may call for a division of a question when the sense will admit of it.

SEC. 5. The yeas and nays on any question, when called for by five Fellows present, shall be taken without debate and recorded on the Minutes.

SEC. 6. After any question has been decided, except one of indefinite postponement, any two Fellows who voted in the majority may at the same or next stated meeting move for a reconsideration thereof; without which no discussion shall be allowed.

SEC. 7. Every Fellow shall have the privilege of speaking once on any question under consideration; but not oftener, unless by permission of the Academy.

SEC. 8. Any Fellow, called to order while speaking, shall take his seat, and the debate be suspended until the point of order is settled.

SEC. 9. All questions of order shall be decided by the Chair, subject to an appeal, which shall be determined by vote, without debate.

SEC. 10. No motion shall be made while a Fellow is speaking; and in all cases the mover must rise and address the Chair.

SEC. 11. All resolutions and amendments shall be offered in writing, when required.

SEC. 12. All questions of order, not provided for by these rules, shall be determined by parliamentary usage.

#### XXVI. ALTERATIONS OF BY-LAWS.

These By-Laws may be suspended by a three-fourths vote at a stated meeting. They may be repealed or amended by a similar vote, provided notice of the same has been given in writing at a previous stated meeting.

LIST OF  
PRESIDENTS OF THE ACADEMY,  
FROM ITS ORGANIZATION.

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ELECTED.

- 1847....\*JOHN STEARNS, M.D.  
1848....\*JOHN W. FRANCIS, M.D., LL.D.  
1849....\*VALENTINE MOTT, M.D., LL.D.  
1850....\*ISAAC WOOD, M.D.  
1851....\*ALEXANDER H. STEVENS, M.D., LL.D.  
1852....\*THOMAS COCK, M.D.  
1853....\*ISAAC WOOD, M.D.  
1854....\*JOSEPH M. SMITH, M.D.  
1855....\*JOHN W. FRANCIS, M.D., LL.D.  
1856....WILLARD PARKER, M.D., LL.D.  
1857....\*VALENTINE MOTT, M.D., LL.D.  
1858....\*JOHN P. BATCHELDER, M.D.  
1859....\*JOHN WATSON, M.D.  
1861....JAMES ANDERSON, M.D.  
1867....ALFRED C. POST, M.D., LL.D.  
1869....\*HENRY D. BULKLEY, M.D.  
1871....\*EDMUND R. PEASLEE, M.D., LL.D.  
1873....AUSTIN FLINT, M.D.  
1875....SAMUEL S. PURPLE, M.D.  
1879....FORDYCE BARKER, M.D., LL.D.
- 

\* Deceased.

# LIST OF VICE-PRESIDENTS OF THE ACADEMY.

## ELECTED.

1847..FRANCIS U. JOHNSTON, M.D.  
 1847..THOMAS COCK, M.D.  
 1847..JOHN B. BECK, M.D.  
 1847..JOHN W. FRANCIS, M.D.,  
       LL.D.  
 1848..JOHN K. RODGERS, M.D.  
 1848..WILLIAM W. MINER, M.D.  
 1849..ISAAC WOOD, M.D.  
 1849..JAMES R. MANLEY, M.D.  
 1849..GALEN CARTER, M.D.  
 1850..JOSEPH M. SMITH, M.D.  
 1850..JAMES C. BLISS, M.D.  
 1850..ALFRED C. POST, M.D., LL.D.  
 1851..JOHN P. BATCHELDER, M.D.  
 1852..JAMES ANDERSON, M.D.  
 1852..GURDON BUCK, JR., M.D.  
 1853..EDWARD L. BEADLE, M.D.  
 1853..F. CAMPBELL STEWART,  
       M.D.  
 1853..WILLIAM DETMOLD, M.D.  
 1853..WILLARD PARKER, M.D.,  
       LL.D.  
 1854..JOHN H. GRISCOM, M.D.  
 1856..JOHN WATSON, M.D.  
 1856..JACKSON BOLTON, M.D.  
 1857..JAMES R. WOOD, M.D.,  
       LL.D.  
 1857..B. FORDYCE BARKER, M.D.,  
       LL.D.  
 1858..CHARLES E. ISAACS, M.D.

## ELECTED.

1858..WM. H. VAN BUREN, M.D.,  
       LL.D.  
 1858..S. CONANT FOSTER, M.D.  
 1859..JOEL FOSTER, M.D.  
 1860..MOSES D. VAN PELT, M.D.  
 1862..HENRY D. BULKLEY, M.D.  
 1863..ALFRED UNDERHILL, M.D.  
 1864..ALFRED C. POST, M.D.,  
       LL.D.  
 1865..HENRY D. BULKLEY, M.D.  
 1866..OLIVER WHITE, M.D.  
 1867..ISAAC R. TAYLOR, M.D.  
 1868..EDMUND R. PEASLEE, M.D.,  
       LL.D.  
 1869..JOSEPH C. HUTCHISON,  
       M.D.  
 1870..WILLIAM C. ROBERTS, M.D.  
 1871..AUSTIN FLINT, M.D.  
 1872..SAMUEL S. PURPLE, M.D.  
 1873..SAMUEL T. HUBBARD, M.D.  
 1874..JOHN C. DALTON, M.D.  
 1875..GOUVERNEUR M. SMITH,  
       M.D.  
 1876..FORDYCE BARKER, M.D.,  
       LL.D.  
 1877..WILLIAM T. WHITE, M.D.  
 1878..T. GAILLARD THOMAS, M.D.  
 1879..JAMES R. LEAMING, M.D.  
 1880..FRANK H. HAMILTON, M.D.,  
       LL.D.

LIST OF  
ORATORS OF THE ACADEMY.

---

- 1847....\*JOHN W. FRANCIS, M.D., LL.D.  
1848....\*JAMES R. MANLEY, M.D.  
1849....\*ALFRED C. POST, M.D., LL.D.  
1850....\*JOSEPH M. SMITH, M.D.  
1851....F. CAMPBELL STEWART, M.D.  
1852....F. CAMPBELL STEWART, M.D.  
1853....\*JOHN A. SWETT, M.D.  
1854....\*JOHN H. GRISCOM, M.D.  
1855....\*JOHN WATSON, M.D.  
1856....WILLIAM DETMOLD, M.D.  
1857....J. MARION SIMS, M.D.  
1858....\*EDMUND R. PEASLEE, M.D., LL.D.  
1859....\*WILLIAM C. ROBERTS, M.D.  
1860....\*JOHN WATSON, M.D.  
1861....\*S. CONANT FOSTER, M.D.  
1862....\*S. CONANT FOSTER, M.D.  
1863....JOHN W. DRAPER, M.D., LL.D.  
1866....JOHN ORDRONAU, M.D.  
1867....STEPHEN SMITH, M.D.  
1868....AUSTIN FLINT, M.D.  
1869....GOUVERNEUR M. SMITH, M.D.  
1872....EDWARD S. DUNSTER, M.D.  
1873....JOHN C. DALTON, M.D.  
1874....D. B. ST. JOHN ROOSA, M.D.  
1875....E. DARWIN HUDSON, JR., M.D.  
1876....WILLIAM T. WHITE, M.D.  
1877....T. GAILLARD THOMAS, M.D.  
1878....WILLIAM H. THOMSON, M.D.  
1879....LEROY M. YALE, M.D.
- 

\* Deceased.

FELLOWS  
OF THE  
NEW YORK ACADEMY OF MEDICINE.  
*INSTITUTED 1847.*

UNA FIDES ALTARE COMMUNE.

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*EXPLANATION OF ABBREVIATIONS USED :*

P. President.	T. Treasurer.
V. P. Vice-President.	L. Librarian.
R. S. Recording Secretary.	A. S. Assistant Recording Secretary.
C. S. Corresponding Secretary.	Trust. Trustee.

Those marked thus \* have deceased.

Those marked thus † have paid composition fees in lieu of all future annual dues.

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ELECTED.

- Original. ADAMS, JOHN G., M.D., R. S., 1850-'51; Trust. 1852.  
C. S., 1849, 1855, 1862, and now in office.
- 1859 AGNEW, CORNELIUS R., M.D.
- 1875 ALLIN, CHARLES M., M.D.
- Original. ANDERSON, JAMES, M.D., V. P. 1852; P. 1861-'67.  
Trust. 1871-'76.
- 1867 ANDERSON, JAMES H., M.D.
- 1847 \* ANDREWS, JARVIS M., M.D., *Obit* 26th January, 1878,  
*æt.* 60.



ELECTED.

- 1862    ARNOLD, EDMUND S. F., M.D., Newport, R. I.  
 1879    ARNOLD, GLOVER C., M.D.  
 1877    ARNOLD, JOHN W. S., M.D.  
 1877    ASSENHEIMER, AUGUSTUS, M.D.  
 1875    AYERS, SAMUEL, M.D.
- 1878    BADGER, WILLIAM, M.D., Flushing, N. Y.  
 1865    BAHAN, THOMAS S., M.D.  
 1867    BALL, A. BRAYTON, M.D.  
 1862    BANKS, JAMES L., M.D., Trust. 1869-'79.  
 1854    BARKER, FORDYCE, M.D., LL.D., V. P. 1857, 1876-'79.  
       P. 1879, now in office.  
 Original. \* BARKER, LUKE, M.D., *Obiit* 13th December, 1849,  
       *æt.* 58.  
 1854    BARRY, ROBERT A., M.D.  
 1862    BARSTOW, JOSIAH W., M.D., Flushing, L. I.  
 Original. \* BATCHELDER, JOHN P., M.D., V. P. 1851-'52; P. 1858.  
       *Obiit* 8th April, 1868, *æt.* 83.  
 1868    BAYLES, GEORGE, M.D.  
 Original. BEADLE, EDWARD L., M.D., C. S. 1850-'52; Trust. 1850;  
       V. P. 1853 to 1858. Poughkeepsie, N. Y.  
 Original. \* BEALES, JOHN C., M.D., *Obiit* 25th July, 1878, *æt.* 74.  
 Original. \* BEALS, GORHAM, M.D., *Obiit* 9th January, 1848, *æt.* 29.  
 1870    BEARD, GEORGE M., M.D.  
 Original. \* BECK, JOHN B., M.D., V. P. 1847 and 1848. *Obiit*  
       9th April, 1851, *æt.* 56.  
 1880    BECKWITH, FRANK E., M. D.  
 Original. \* BEDFORD, GUNNING S., M.D. *Obiit* 5th September,  
       1870, *æt.* 64.  
 1862    BELDEN, EBENEZER B., M.D.  
 1863    BELL, AGRIPPA N., M.D.  
 1871    BELL, CHRISTOPHER M., M.D.  
 1877    BERMINGHAM, E. J., M.D.  
 1864    \* BIBBINS, WILLIAM B., M.D. Trust. 1867-71. *Obiit*  
       16th January, 1871, *æt.* 46.  
 1871    BILLINGTON, CORNELIUS E., M.D.  
 1872    BLAKE, JOHN ELLIS, M.D.

## ELECTED.

- Original. BLAKEMAN, WILLIAM N., M.D. Trust. 1853 to 1857.
- Original. \* BLISS, JAMES C., M.D., V. P. 1850. *Obiit* 31st July, 1855, *æt.* 64.
- Original. BLIVEN, JEREMIAH P., M.D.
- Original. \* BLOIS, SAMUEL, M.D., *Obiit* 19th October, 1873.
- 1857 BLUMENTHAL, MARK, M.D.
- 1873 \* BOGERT, CORNELIUS R., M.D., *Obiit* 10th Nov. 1877, *æt.* 77.
- Original. \* BOLTON, JACKSON, M.D., R. S. 1852; V. P. 1856. *Obiit* 16th February, 1866, *æt.* 51.
- 1848 \* BOORAEM, AUGUSTUS C., M.D., *Obiit* 16th December, 1871, *æt.* 46.
- 1880 BOSWORTH, FRANK H., M.D.
- Original. \* BOYD, THOMAS, M.D., *Obiit* 18th March, 1856, *æt.* 83.
- 1869 BOZEMAN, NATHAN, M.D.
- 1876 BRADLEY, EDWARD, M.D.
- 1847 \* BRADY, PATRICK J., M.D., *Obiit* 23d October, 1856, *æt.* 42.
- 1878 BRANDIS, ADOLPH C., M.D.
- 1880 BREAKELL, JAMES A., M.D.
- 1863 BROWN, D. TILDEN, M.D.
- 1867 \* BROWN, JAMES L., M.D., *Obiit* 4th February, 1873, *æt.* 41.
- 1848 \* BROWN, WILLIAM K., M.D., Brooklyn, L. I., *Obiit* 4th July, 1879, *æt.* 72.
- 1848 \* BRUENINGHAUSEN, CHARLES, M.D., *Obiit* 20th Aug., 1876, *æt.* 67.
- 1880 BRUSH, EDWARD F., M.D.
- 1875 BRYANT, JOSEPH D., M.D.
- Original. \* BUCK, GURDON, M.D., C. S. 1848; V. P. 1852, 1855, 1856, 1859, 1860. *Obiit* 6th March, 1877, *æt.* 69.
- 1855 \* BUDD, CHARLES A., M.D., *Obiit* 17th May, 1877, *æt.* 43.
- Original. \* BULKLEY, HENRY D., M.D., V. P. 1862-'68; P. 1870-'71; Trust. 1871. *Obiit* 4th January, 1872, *æt.* 67.
- 1874 BULKLEY, LUCIUS D., M.D.
- 1880 BULL, CHARLES S., M.D.
- 1879 BULLARD, WILLIAM E., M.D.

ELECTED.

- 1848 \* BULLUS, EDWARD, M.D., *Obiit* 25th Sept., 1854, *æt.* 50.
- 1879 \* BUMSTEAD, FREEMAN J., M.D., LL.D., *Obiit* 28th November, 1879, *æt.* 53.
- 1879 BURCHARD, THOMAS H., M.D.
- 1861 BURKE, JOHN, M.D.
- 1865 BURRALL, FREDERICK A., M.D.
- 1877 BUTLER, GEORGE H., M.D.
- 1854 BYRNE, JOHN, M.D., Brooklyn, N. Y.
  
- Original. \* CAMERON, JAMES, M.D., *Obiit* 12th December, 1851, *æt.* 66.
- 1880 CAMERON, EDWARD M., M.D.
- 1862 \* CAMMANN, GEORGE P., M.D., *Obiit* 14th February, 1863, *æt.* 58.
- Original. \* CAMPBELL, JAMES, M.D., *Obiit* 12th March, 1853, *æt.* 59.
- 1869 CARO, SALVATORE, M.D.
- 1880 CARPENTER, WESLEY M., M.D.
- 1858 \* CARRINGTON, WILLIAM A., M.D., *Obiit* 17th July, 1866.
- Original. \* CARTER, GALEN, M.D., V. P. 1849-'52; Trust. 1851. *Obiit* 2d April, 1870, *æt.* 74.
- 1879 CASTLE, FREDERICK A., M.D.
- 1869 CHADSEY, ALONZO J., M.D.
- 1847 CHALMERS, THOMAS C., M.D.
- 1879 CHAMBERLAIN GEORGE W., M.D.
- 1862 CHAMBERLAIN, WILLIAM M., M.D.; R. S., 1865-'68.
- 1879 CHAMBERS, PORTER F., M.D.
- Original. \* CHAPIN, JOHN R., M.D., *Obiit* 23d June, 1852, *æt.* 41.
- 1872 CHAUVEAU, JEAN F., M.D.
- 1847 \* CHEESMAN, JOHN C., M.D., *Obiit* 11th October, 1862, *æt.* 75.
- 1871 CHEESMAN, TIMOTHY MATLACK, M.D.
- 1865 \* CHILDS, TIMOTHY, M.D., *Obiit* 3d Sept., 1865, *æt.* 42.
- 1856 CHURCH, ALLEN S., M.D.
- 1859 \* CHURCHILL, CHARLES W., M.D., *Obiit* 27th Oct., 1859.
- 1878 CISNEROS, JUAN, M.D.
- 1856 CLARK, ALONZO, M.D., LL.D.
- 1870 CLARK, JAMES G., M.D., W. New Brighton, S. I., N. Y.

## ELECTED.

- Original. \* CLARKSON, CORNELIUS V., M.D., *Obiit* 1st June, 1877, *æt.* 63.
- Original. CLEMENTS, JAMES W. G., M.D.  
 1879 CLEVELAND, CLEMENT, M.D.  
 1859 \* COCHRAN, GEORGE, M.D., Brooklyn, *Obiit* 19th November, 1872, *æt.* 40.
- 1854 \* CONANT, DAVID S., M.D., *Obiit* 8th October, 1865, *æt.* 40.  
 1864 \* CONNOLLY, JAMES J., M.D., *Obiit* 18th June, 1871, *æt.* 36.
- Original. \* COOPER, JAMES S., M.D., *Obiit* 11th April, 1867, *æt.* 49.
- Original. \* COVEL, JOHN C., M.D., *Obiit* 4th November, 1860, *æt.* 64.  
 1876 COWLES, EDWARD O., M.D.  
 1862 \* COX, HENRY G., M.D., *Obiit* 29th May, 1866, *æt.* 47.  
 1870 CRAMPTON, HENRY E., M.D.  
 1849 CRANE, JAMES, M.D., Brooklyn, N. Y.  
 1847 CRANE, JOHN J., M.D.  
 1866 CRANE, JOSEPH S., M.D.  
 1851 \* CREVELING, ABRAHAM, M.D., *Obiit* 28th April, 1853, *æt.* 39.
- 1880 CUSHMAN, WILLIAM F., M.D.  
 1877 CYPERT, JOHN R., M.D.
- 1868 \* DALTON, EDWARD B., M.D., *Obiit* 13th May, 1872, *æt.* 37.  
 1856 DALTON, JOHN C., M.D., Orator, 1873; V. P., 1874 to 1877.
- 1867 DANA, SAMUEL W., M.D.
- Original. DAVIS, JOHN, M.D.  
 1879 DAWSON, BENJAMIN F., M.D.  
 1879 DE GARMO, WILLIAM B., M.D.
- Original. \* DELAFIELD, EDWARD, M.D., *Obiit* 13th February, 1875, *æt.* 80.
- 1880 DELAVAN, D. BRYSON, M.D.  
 1876 DE LUNA, ABELARDO B., M.D.  
 1879 DENNIS, FREDERICK S., M.D.  
 1859 DERBY, EDWARD W., M.D.  
 1877 DERBY, RICHARD H., M.D.
- Original. DETMOLD, WILLIAM, M.D., V. P. 1853 to 1856; Orator, 1856.

**ELECTED.**

- 1879     DESSAU, S. HENRY, M.D.
- 1880     DEXTER, B. F., M.D.
- 1860     \* DONAGHE, WILLIAM R., M.D., *Obiit* 18th July, 1866,  
          *æt.* 36.
- 1856     DOUGLAS, JOHN H., M.D.
- 1848     \* DOUGLAS, ROBERT, M.D., *Obiit* 25th July, 1861, *æt.* 47.
- Original. \* DOWNS, HENRY S., M.D., *Obiit* 2d May, 1879, *æt.* 67.
- Original. \* DRAKE, BENJAMIN, M.D., C. S. 1847. *Obiit* 11th Jan-  
          uary, 1871, *æt.* 65.
- 1858     DRAPER, WILLIAM H., M.D.
- 1847     DUDLEY, WILLIAM H., M.D., Brooklyn, N.Y.
- 1880     DUNCAN, WILLIAM F., M.D.
- 1877     DURANT, GHISLANI, M.D.
- 1847     \* DWIGHT, WILLIAM W., M.D., *Obiit* 11th July, 1861,  
          *æt.* 54.
  
- 1847     \* EARLE, EDWARD, M.D., *Obiit* 21st August, 1849, *æt.* 37.
- 1878     EDEN, JOHN H., M.D.
- 1851     \* ELDER, ALEXANDER, M.D., *Obiit* 3d Feb., 1875, *æt.* 70.
- 1858     ELIOT, ELLSWORTH, M.D.
- 1858     \* ELLIOT, GEORGE T., M.D., *Obiit* 28th January, 1871,  
          *æt.* 43.
- 1870     \* ELLIS, HENRY A., M.D., *Obiit* 25th January, 1876,  
          *æt.* 41.
- Original. \* ELLIS, SAMUEL C., M.D., *Obiit* 20th July, 1874, *æt.* 71.
- 1862     ELSBERG, LOUIS, M.D.
- 1856     EMMET, THOMAS ADDIS, M.D.
- 1880     EMERSON, J. H., M.D.
- Original. \* ENOS, DEWITT C., M.D., Brooklyn, N. Y., *Obiit* 14th  
          December, 1868, *æt.* 48.
  
- 1864     FARNHAM, HORACE P., M.D., T. 1878, now in office.
- 1878     FARRINGTON, JOSEPH O., M.D.
- Original. \* FERGUSON, JOHN T., M.D., *Obiit* 11th October, 1859,  
          *æt.* 55.
- 1847     \* FERRIS, FLOYD T., M.D., *Obiit* 6th November, 1855,  
          *æt.* 62.

## ELECTED.

- 1855 FINNELL, THOMAS C., M.D.  
 1847 \* FISK, LYMAN, M.D., *Obiit* 1st August, 1859, *æt.* 36.  
 1847 FITCH, JAMES D., M.D.  
 1879 FLEMING, MARTIN J., M.D.  
 1862 FLINT, AUSTIN, M.D., Orator 1868; V. P. 1871 and 1872; P. 1873 and 1874; Trust. 1875 to 1880.  
 1862 FLINT, AUSTIN, Jr., M.D.  
 1870 FOSTER, FRANK P., M.D.  
 Original. FOSTER, JOEL, M.D., V. P. 1859 to 1862; Trust. 1862 to 1866.  
 Original. \* FOSTER, SAMUEL CONANT, M.D., R. S. 1855 and 1856; V. P. 1858 and 1859; Orator 1861 and 1862. *Obiit* 18th April, 1873, *æt.* 56.  
 1874 FOWLER, GEORGE B., M.D.  
 1856 \* FOY, MICHAEL E., M.D., *Obiit* 9th June, 1861, *æt.* 37.  
 Original. \* FRANCIS, JOHN W., M.D., LL.D., Orator 1847; V. P. 1847; P. 1848 and 1855. *Obiit* 8th February, 1861, *æt.* 71.  
 1863 FRANCIS, SAMUEL W., M.D., Newport, R.I.  
 1871 FRANKEL, EDWARD, M.D.  
 1880 FRAZER, JOHN GORDON, M.D.  
 1870 FROTHINGHAM, WILLIAM, M.D.  
 1879 FRUITNIGHT, J. HENRY, M.D.  
 1871 FULLER, ROBERT M., M.D.  
 1865 FURMAN, GUIDO, M.D.
- Original. GARRISH, JOHN P., M.D.  
 1879 GARRIGUES, HENRY J., M.D.  
 1848 \* GESCHEIDT, ANTHONY, M.D., *Obiit* 20th August, 1868, *æt.* 68.  
 1877 GIBNEY, VIRGIL P., M.D.  
 1863 GILFILLAN, WILLIAM, M.D., Brooklyn, N. Y.  
 1847 \* GILFORD, JACOB T., M.D., *Obiit* 11th June, 1869, *æt.* 63.  
 1877 GILLETTE, WALTER R., M.D.  
 1879 GLAZIER, W. C. W., M.D.  
 1856 GOMEZ, HORATIO, M.D.  
 1856 GOULEY, JOHN WM. S., M.D.

ELECTED.

- 1847 \* GRAHAM, JOHN, M.D., *Obiit* 20th May, 1847, *æt.* 46.  
 1848 \* GREEN, DAVID, M.D., *Obiit* 18th October, 1856, *æt.* 60.  
 Original. \* GREEN, HORACE, M.D., LL.D., *Obiit* 29th November, 1866, *æt.* 63.  
 Original. \* GREENE, ISAAC, M.D., *Obiit* 2d July, 1854, *æt.* 40.  
 Original. \* GRISCOM, JOHN H., M.D., Orator 1854; V. P. 1854; Trust, 1851, and 1856 to 1859. *Obiit* 28th April, 1874, *æt.* 64.  
 1872 GRISWOLD, HENRY, M.D.  
 1847 \* GUERNSEY, PETER B., M.D., *Obiit* 26th Nov., 1873, *æt.* 69.  
 1847 \* GUNN, ALEXANDER N., M.D., *Obiit* 21st Dec., 1871, *æt.* 60.
- 1875 HADDEN, ALEXANDER, M.D.  
 Original. HALL, EDWARDS, M.D.  
 Original. HALL, SAMUEL, M.D.  
 1874 HALL, WILLIAM H., M.D.  
 Original. \* HALSTED, JONATHAN, M.D., *Obiit* 10th April, 1856, *æt.* 46.  
 1873 HAMILTON, ALLAN McL., M.D., Statistical Secretary, 1874 to 1879.  
 1864 HAMILTON, FRANK H., M.D., LL.D., V. P. 1880, now in office.  
 1874 HANKS, HORACE T., M.D., A. S. 1874-'77; R. S. 1877 to 1879.  
 1857 HARRIS, ELISHA, M.D.  
 1879 HARRISON, GEORGE T., M.D.  
 1859 \* HARSEN, JACOB, M.D., Trust. 1862 to 1866, *Obiit* 31st December, 1862, *æt.* 54.  
 1879 \* HART, H. LE BARON, M.D., *Obiit* 21st February, 1880, *æt.* 38.  
 1880 HART, GEORGE, M.D.  
 Original. \* HART, JOHN, M.D., *Obiit* 9th August, 1867, *æt.* 57.  
 1877 HARWOOD, EDWARD C., M.D.  
 1865 \* HAZLETT, JOHN, M.D., *Obiit* 4th March, 1870, *æt.* 53.  
 1865 HEDGES, DAVID A., M.D.  
 1880 HEINEMAN, HENRY N., M.D.



## ELECTED.

- 1871 HENRY, MORRIS H., M.D.  
 1847 \* HENSCHEL, CHARLES, M.D., *Obiit* 18th Sept., 1872, *æt.* 63.  
 1867 HERRICK, EVERETT, M.D.  
 1857 HERZOG, MAX, M.D.  
 1863 \* HEWIT, HENRY S., M.D., *Obiit* 19th August, 1873, *æt.* 47.  
 1856 HEYWOOD, CHARLES F., M.D., R. S. 1857 and 1858.  
 1879 HICKOK, GEORGE B., M.D.  
 1879 HILLS, JOHN, M.D.  
 1856 HINTON, JOHN H., M.D., R. S. 1861 to 1865.  
 1854 \* HIRSCH, SIMON, M.D., *Obiit* 23d April, 1878, *æt.* 61.  
 1880 HITCHCOCK, URBAN G., M.D.  
 Original. \* HOBART, WILLIAM H., M.D., *Obiit* 21st Jan., 1857, *æt.* 52.  
 1877 HODGMAN, ABBOTT, M.D.  
 1847 \* HOGAN, DANIEL M., M.D., *Obiit* 1849.  
 1871 HOGAN, EDWARD J., M.D.  
 1867 HOGAN, MICHAEL, M.D.  
 1854 HOLCOMBE, WILLIAM F., M.D., A.S. 1856.  
 Original. \* HORSFIELD, THOMAS W., M.D., *Obiit* 19th Feb., 1868, *æt.* 64.  
 1872 HOWE, JOSEPH W., M.D.  
 Original. HUBBARD, SAMUEL T., M.D., C. S. 1853 to 1858; V. P. 1873 to 1876; Trust. 1862 to 1873, 1876, now in office.  
 1874 HUDSON, E. DARWIN, Jr., M.D., Orator, 1875.  
 1866 HULL, JOSEPH J., M.D.  
 1867 HUMPHREYS, GEORGE H., M.D.  
 1878 HUNTER, ALEXANDER S., M.D.  
 1849 \* HUNTER, ABRAHAM T., M.D., *Obiit* 1st August, 1849, *æt.* 52.  
 1879 HUNTER, JAMES B., M.D.  
 1879 HUSTACE, FRANCIS, M.D.  
 1856 HUSTED, NATHANIEL C., M.D.  
 Original. \* HUTCHINSON, EUGENE F., M.D., *Obiit* 2d March, 1848, *æt.* 24.  
 1857 HUTCHISON, JOSEPH C., M.D., Brooklyn, N. Y.; V. P. 1869 to 1873.

ELECTED.

- 1880 HUTTON, ALLAN C., M.D.  
 1848 \* HYSLOP, JAMES, M.D., *Obiit* 17th May, 1870, *æt.* 53.
- 1850 \* ISAACS, CHARLES E., M.D., Brooklyn, N. Y., V. P., 1858.  
*Obiit* 16th June, 1860, *æt.* 48.  
 1875 IVES, FRANK L., M.D.  
 Original. \* IVES, GEORGE W., M.D., *Obiit* 6th Dec., 1874, *æt.* 55.
- 1880 JACKSON, GEORGE F., M.D.  
 Original. JACKSON, WILLIAM H., M.D.  
 1857 JACOBI, ABRAHAM, M.D.  
 1879 JACOBUS, A. M., M.D.  
 1853 JAMES, EDWARD H., M.D., A. S. 1865-'68; R. S. 1868  
 to 1871.  
 1879 JANEWAY, EDWARD G., M.D.  
 1867 JANVRIN, JOSEPH E., M.D.  
 1852 JENKINS, J. FOSTER, M.D., Yonkers, N. Y.  
 1875 JOHNSON, LAURENCE, M.D., L. 1877, now in office.  
 1855 \* JOHNSON, WILLIAM J., M.D., *Obiit* 22d Sept., 1860,  
*æt.* 55.  
 Original. \* JOHNSTON, FRANCIS U., M.D., V. P. 1847. *Obiit* 7th  
 January, 1858, *æt.* 61.  
 1852 JONES, ALANSON S., M.D.  
 1856 \* JONES, E. LEE, M.D., *Obiit* 30th January, 1876, *æt.* 46.  
 1847 JONES, WILLIAM W., M.D.  
 1872 JUDSON, ADONIRAM B., M.D.
- 1857 \* KAMMERER, JOSEPH, M.D., *Obiit* 10th June, 1875, *æt.* 53.  
 1876 KATZENBACH, WILLIAM H., M.D., A.S., now in office.  
 Original. \* KEARNY, RAVAUD, M.D., *Obiit* 21st March, 1849, *æt.* 26.  
 1879 KELLOGG, THEODORE H., M.D.  
 1880 KEMP, WILLIAM., M.D.  
 1847 KENNEDY, JAMES, M.D.  
 1863 \* KERRIGAN, JOSEPH A., M.D., *Obiit* 17th January, 1879,  
*æt.* 46.  
 1878 KERSHNER, EDWARD, M.D.

## ELECTED.

- Original. \* KILBOURNE, J. SAGE, M.D., *Obiit* 12th June, 1877,  
æt. 71.
- 1854 \* KIMBARK, EVERETT H., M.D., *Obiit* 29th August, 1872,  
æt. 53.
- 1851 \* KINGSBURY, GEORGE H., M.D., *Obiit* 4th May, 1852,  
æt. 31.
- 1880 KINNICUTT, FRANK P., M.D.
- Original. \* KISSAM, RICHARD S., M.D., Trust. 1853 to 1860, *Obiit*  
28th November, 1861, æt. 53.
- 1874 KNAPP, HERMAN, M.D.
- 1876 KNIGHT, JAMES, M.D.
- 1854 \* KRACKOWIZER, ERNST, M.D., *Obiit* 23d Sept., 1875, æt. 53.
- 1865 LAWRENCE, JONATHAN S., M.D.
- 1869 LEALE, CHARLES A., M.D.
- 1854 LEAMING, JAMES R., M.D. ; V. P. 1879, now in office.
- 1869 LEE, CHARLES C., M.D.
- 1874 LEFFERTS, GEORGE M., M.D.
- 1872 LEO, SIMEON N., M.D.
- 1850 \* LEO WOLF, GEORGE, M.D., *Obiit* 14th March, 1855,  
æt. 40.
- Original. LEO WOLF, MORRIS, M.D.
1851. \* LEVERIDGE, BENJAMIN C., M.D., *Obiit* 16th April, 1862,  
æt. 63.
- 1880 LEWIS, DANIEL, M.D.
- 1866 LIDELL, JOHN A., M.D.
- 1879 LINCOLN, RUFUS P., M.D.
- Original. LINSLEY, JARED, M.D. ; Trust. 1865 to 1870.
- 1864 LITTLE, JAMES L., M.D.
- 1855 LIVINGSTON, WATTS C., M.D.
- 1876 LOCKROW, ARTHUR V. B., M.D.
- 1861 \* LOINES, JONAS P., M.D., *Obiit*. 15th December, 1873,  
æt. 52.
- 1863 LOOMIS, ALFRED L., M.D.
- 1876 LORDLY, JAMES E. M., M.D.
- 1876 LUDLUM, WILLIAM S., M.D.
- 1871 LUSK, WILLIAM T., M.D.

ELECTED.

- 1874 LYNCH, PATRICK J., M.D.  
 1847 \* LYON, JAMES L., M.D., *Obiit* 24th December, 1858,  
*æt.* 50.
- 1864 MACGREGOR, JAMES R. M.D.  
 1857 \* McALLISTER, GEORGE, M.D., *Obiit* 29th July, 1864,  
*æt.* 37.
- 1880 McBRIDE, THOMAS A., M.D.  
 1866 McCLELLAN, CHRISTOPHER R., M.D., Brooklyn, N. Y.  
 Original. \* McCLELLAND, JOHN, M.D., *Obiit* 20th February, 1875,  
*æt.* 69.
1847. \* McDONALD, JAMES, M.D., *Obiit* 5th May, 1849, *æt.* 45.  
 1880 McLAURY, WILLIAM M., M.D.  
 1857 McLEOD, S. B. WYLIE, M.D.  
 1865 McMILLAN, CHARLES, M.D.  
 1847 \* MACNEVEN, WILLIAM H., M.D., *Obiit* 12th May, 1854,  
*æt.* 38.
- 1848 McNULTY, JOHN, M.D.  
 Original. \* MANLEY, JAMES R., M.D., Orator, 1848; V. P. 1849.  
*Obiit* 21st November, 1851, *æt.* 69.
- 1876 MANN, MATHEW D., M.D., Hartford, Ct.  
 Original. MARKOE, THOMAS M., M.D., L. 1847.
- 1847 \* MARTIN, JOSEPH, M.D., *Obiit* 26th April, 1864, *æt.* 67.  
 1872 MARTIN, T. DWIGHT, M.D.
- Original. \* MARVIN, DAVID D., M.D., *Obiit* 21st Oct., 1852, *æt.* 40.  
 1877 MASON, THEODORE L., M.D., Brooklyn, N. Y.  
 1847 MAXWELL, WILLIAM H., M.D.
- Original. \* MEIKLEHAM, DAVID S., M.D., *Obiit* 20th Nov., 1849,  
*æt.* 45.
- 1878 MERRILL, JOHN N., M.D.  
 Original. METCALFE, JOHN T., M.D.
- 1879 MILHAU, JOHN J., M.D.  
 1848 \* MILLER, JOHN, M.D., *Obiit* 13th January, 1863, *æt.* 56.  
 1848 \* MILLER, WM. ELLISON, M.D., *Obiit* 16th January,  
 1852, *æt.* 52.
- 1879 MILNE, CHARLES, M.D.  
 1848 \* MINER, WILLIAM, M.D., *Obiit* 16th Nov., 1859, *æt.* 45.

## ELECTED.

Original. \* MINER, WILLIAM W., M.D., V. P. 1848. *Obiit* 20th March, 1863, *æ*t. 83.

1880 MIRANDA, RAMON L., M.D.

1847 MITCHELL, CHAUNCEY L., M.D., Brooklyn, N. Y.

1852 MONELL, JOSEPH A., M.D.

1848 \* MOORE, SAMUEL W., M.D., *Obiit* 26th August, 1854, *æ*t. 67.

1849 \* MORAN, THOMAS, M.D., *Obiit* 1853.

1870 MORRIS, MOREAU, M.D.

1870 MORRIS, STUYVESANT F., M.D.

1879 MORTON, WILLIAM J., M.D.

1880 MORROW, P. ALBERT, M.D.

1874 MOSHER, JACOB S., M.D., Albany, N. Y.

Original. \* MOTT, VALENTINE, M.D., LL.D., P. 1849 and 1857. *Obiit* 26th April, 1865, *æ*t. 79.

1875 MUNDÉ, PAUL F., M.D.

1871 NEFTTEL, WILLIAM B., M.D.

1848 \* NEILSON, JOHN, M.D., *Obiit* 19th June, 1857, *æ*t. 82.

1852 \* NELSON, JAMES B., M.D., *Obiit* 28th Sept., 1874, *æ*t. 61.

1874 NESMITH, ROBERT D., M.D.

1879 NEWCOMB, GILBERT L., M.D.

1847 NICHOLS, ELIAS S., M.D.

1859 NICHOLS, TRUMAN, M.D.

1873 NICOLL, HENRY D., M.D.

1861 NOEGGERATH, EMIL, M.D.

1871 \* NOTT, JOSIAH CLARK, M.D., *Obiit* 31st March, 1873, *æ*t. 69.

1862 NOYES, HENRY D., M.D.

Original. \* OGDEN, BENJAMIN, M.D., Trust. 1853 to 1859, 1861. *Obiit* 18th June, 1867, *æ*t. 69.

1873 ORTON, SAMUEL H., M.D.

1861 OTIS, FESSENDEN N., M.D.

1857 \* O'REILLY, JOHN, M.D., *Obiit* 6th Dec., 1868, *æ*t. 55.

1861 O'SULLIVAN, RICHARD J., M.D.

ELECTED.

- 1871     PACKARD, CHARLES W., M.D.
- 1864     \* PAINE, MARTYN, M.D., LL.D., *Obiit* 10th Nov., 1877,  
          *æt.* 83.
- 1869     PARDEE, CHARLES I., M.D.
- 1873     \* PARIGOT, JULIUS, M.D., *Obiit* 30th Sept., 1877.
- Original. PARKER, WILLARD, M.D., LL.D., Trust. 1851; V. P.  
          1853; P. 1856.
- 1874     PARKER, WILLARD, Jr., M.D.
- 1847     \* PARKINSON, WILLIAM B., M.D., *Obiit* 11th May, 1856,  
          *æt.* 45.
- 1878     PARTRIDGE EDWARD L., M.D.
- 1847     \* PAUL, JAMES C., M.D., *Obiit* 5th May, 1859.
- 1858     \* PEASLEE, EDMUND R., M.D., LL.D., Orator 1858; V. P.  
          1868 to 1871; P. 1871 and 1872; Trust. 1873.  
          *Obiit* 22d Jan., 1878, *æt.* 63.
- 1878     PEASLEE, EDWARD H., M.D.
- Original. \* PENNELL, RICHARD, M.D., *Obiit* 11th April, 1861, *æt.* 62.
- 1879     PERRY, JAMES L., M.D.
- 1870     PETERS, JOHN C., M.D.
- 1879     PETERS, GEORGE A., M.D.
- 1874     \* PEUGNET, EUGENE, M.D., *Obiit* 10th Oct., 1879, *æt.* 42.
- Original. \* PHILLIPS, SAMUEL B., M.D., *Obiit* 3d March, 1857, *æt.* 54.
- Original. \* PIATT, WILLIAM F., M.D., *Obiit* 6th May, 1848, *æt.* 59.
- 1875     PIFFARD, HENRY G., A.M., M.D.
- 1867     PINKNEY, HOWARD, M.D.
- 1873     POLK, WILLIAM M., M.D.
- 1865     POMEROY, OREN D., M.D.
- Original. POND, JAMES O., M.D., Treasurer, 1848 to 1877.
- 1869     POOLEY, THOMAS R., M.D.
- 1856     \* PORTER, MORTIMER G., M.D., *Obiit* 24th November,  
          1863, *æt.* 37.
- 1847     POST, ALFRED C., M.D., LL.D., Orator 1849; V. P.  
          1861 to 1866; P. 1867 and 1868.
- 1870     POST, WILLIAM H. B., M.D., A. S. 1871 to 1874.
- Original. \* POWER, WILLIAM M.D., *Obiit* 14th September, 1858,  
          *æt.* 60.
- Original. \* PRATT, PETER, M.D., *Obiit* 1860, *æt.* 52.
- 1871     PURDY, ALFRED E. M., M.D.

**ELECTED.**

- Original. PURDY, ALFRED S., M.D.  
 Original. PURDY, SAMUEL A., M.D., R.S. 1853 and 1854.  
 Original. † PURPLE, SAMUEL S., M.D., V. P. 1872 to 1875; P. 1875  
                   to 1879; Trust. 1879, now in office.  
       1847 PUTNAM, FREDERICK A., M.D.  
       1879 PUTZEL, LEOPOLD, M.D.  
  
       1876 QUACKENBOS, HENRY F., M.D.  
  
       1876 RABORG, SAMUEL A., M.D.  
       1875 RAMSDELL, EDWIN D., M.D.  
       1851 \* RANDOLPH, ISRAEL, M.D., *Obiit* 2d June, 1877, *æt.* 76.  
       1851 \* RANNEY, MOSES H., M.D., *Obiit* 7th December, 1864,  
                   *æt.* 50.  
       1856 RAPHAEL, BENJAMIN I., M.D.  
       1859 \* RAY, ROBERT, Jr., M.D., *Obiit* 3d July, 1860, *æt.* 27.  
       1879 READ, IRA B., M.D.  
 Original. \* REESE, DAVID MEREDITH, M.D., LL.D., *Obiit* 13th May,  
                   1861, *æt.* 60.  
       1879 REID, KENNETH, M.D.  
       1872 REINFELDER, MAX J., M.D., Yonkers, N. Y.  
       1866 REYNOLDS, JAMES B., M.D.  
       1855 RICHARDS, JOSEPH W., M.D.  
       1874 ROBERTS, NATHAN S., M.D.  
       1878 ROBERTS, STEPHEN M., M.D.  
 Original. \* ROBERTS, WILLIAM C., M.D., Orator 1859, V. P. 1870  
                   to 1873. *Obiit* 9th December, 1873, *æt.* 63.  
 Original. \* ROBESON, ABEL B., M.D., *Obiit* 22d March, 1853, *æt.* 36.  
       1872 ROBIE, JOHN W., M.D.  
       1876 ROBINSON, BEVERLEY, M.D.  
       1869 ROCKWELL, ALPHONZO D., M.D.  
 Original. \* ROCKWELL, WILLIAM, M.D., Trust. 1854, 1855. *Obiit*  
                   30th December, 1867, *æt.* 67.  
       1873 \* RODENSTEIN, CHARLES F., M.D., *Obiit* 18th March, 1876,  
                   *æt.* 49.  
       1862 RODENSTEIN, LOUIS A., M.D.  
 Original. \* RODGERS, JOHN KEARNY, M.D., V. P. 1848-1851, Trust.  
                   1851. *Obiit* 9th Nov., 1851, *æt.* 58.



ELECTED.

- 1847 \* ROGERS, J. SMYTH, M.D., *Obiit* 29th March, 1851, *æt.* 58.
- 1872 ROOF, STEPHEN W., M.D.
- 1862 ROSENBERG, EMIL, M.D.
- 1858 ROSS, JAMES, M.D.
- Original. SABINE, GUSTAVUS A., M.D.
- 1874 SABINE, THOMAS T., M.D.
- 1879 SANDERS, EDWARD, M.D.
- 1873 SATTERLEE, F. LE ROY, M.D.
- 1864 SATTERLEE, RICHARD S., M.D.
- Original. SAYRE, LEWIS A., M.D.
- 1852 \* SCHILLING, ERNEST, M.D., *Obiit* 25th April, 1872, *æt.* 62.
- Original. \* SCHMIDT, JOHN W., JR., M.D., *Obiit* 1857, *æt.* 50.
- 1847 \* SCHIRMER, WILLIAM, M.D., *Obiit* 8th July, 1878, *æt.* 70.
- 1873 SCHULTZE, LOUIS F., M.D.
- 1873 SEGUIN, EDWARD C., M.D.
- 1870 SELL, E. H. M., M.D.
- 1856 \* SEWALL, JOHN G., M.D., *Obiit* 18th January, 1874, *æt.* 51.
- 1879 SEXTON, SAMUEL, M.D.
- Original. \* SHANKS, JOHN, M.D., *Obiit* 10th August, 1870, *æt.* 69.
- 1862 \* SHEPPARD, JOHN W., M.D., *Obiit* 5th Oct., 1868, *æt.* 46.
- Original. \* SHEERWOOD, BURRITT, M.D., *Obiit* 10th August, 1854, *æt.* 53.
- 1879 SHRADY, JOHN, M.D.
- 1856 SIMS, J. MARION, M.D., Orator 1857.
- 1880 SILVER, HENRY M., M.D.
- 1879 SKENE, ALEXANDER J. C., M.D., Brooklyn, N. Y.
- 1876 SMITH, ABRAM A., M.D.
- 1877 SMITH, ANDREW H., M.D.
- Original. \* SMITH, DAVID, M.D., *Obiit* 16th January, 1867, *æt.* 57.
- 1870 \* SMITH, DAVID A., M.D., *Obiit* 9th April, 1872, *æt.* 28.
- Original. \* SMITH, GILBERT, M.D., *Obiit* 16th July, 1851, *æt.* 80.
- 1858 SMITH, GOUVERNEUR M., M.D., L. 1861, 1862; Orator, 1869; V. P. 1875 to 1878; Trust. 1878, now in office.
- 1864 SMITH, HANBURY, M.D.
- By-Laws, February, 1880.—4*

## ELECTED.

- 1853 SMITH, JAMES O., M.D.
- Original. \* SMITH, JOSEPH MATHER, M.D., Orator 1850; V. P. 1850 to 1852; P. 1854; Trust. 1859; *Obiit* 22d April, 1866, *æt.* 77.
- 1856 SMITH, J. LEWIS, M.D.
- 1866 SMITH, OSCAR G., M.D.
- 1855 SMITH, STEPHEN, M.D., Orator, 1867.
- 1870 \* SNELLING, FREDERICK G., M.D., *Obiit* 26th November, 1878, *æt.* 47.
- 1847 \* SNOWDEN, JOHN, M.D., *Obiit* 22d January, 1848, *æt.* 33.
- 1864 SPEIR, S. FLEET, M.D., Brooklyn, N. Y.
- Original. \* SPRING, EDWARD, M.D., *Obiit* 13th Feb., 1850, *æt.* 42.
- 1859 SQUIBB, EDWARD R., M.D., Brooklyn, N. Y.
- 1876 \* STANLEY, C. GRAHAM, M.D., *Obiit* 24th May, 1877, *æt.* 30.
- Original. \* STEARNS, JOHN, M.D., P. 1847. *Obiit* 17th March, 1848, *æt.* 78.
- 1880 STEIN, ALEXANDER W., M.D.
- Original. \* STEPHENSON, MARK, M.D., *Obiit* 28th August, 1865, *æt.* 62.
- Original. \* STEVENS, ALEXANDER H., M.D., LL.D., P. 1851, *Obiit* 30th March, 1869, *æt.* 79.
- 1847 \* STEWART, JAMES, M.D., *Obiit* 12th Sept., 1864, *æt.* 65.
- 1847 \* STICKNEY, JOSIAH DWIGHT, M.D., *Obiit* 30th Sept., 1849, *æt.* 34.
- 1865 \* STILES, R. CRESSON, M.D., *Obiit* 17th April, 1873, *æt.* 42.
- 1875 STIMSON, DANIEL M., M.D.
- Original. \* STIMPSON, EDWIN B., M.D., *Obiit* 15th May, 1858, *æt.* 36.
- 1865 \* STIRLING, THOMAS B., M.D., *Obiit* 10th June, 1877, *æt.* 47.
- Original. \* STONE, JOHN O., M.D., *Obiit* 7th June, 1876, *æt.* 63.
- Original. \* STORER, EBENEZER, M.D., *Obiit* 20th May, 1879, *æt.* 77.
- 1874 STRACHAN, A. RUSSELL, M.D.
- SWASEY, JOHN H., M.D.
- SWAY, HUGH, M.D., *Obiit* 15th Sept., 1857, *æt.* 52.
- SWAY, JAMES, M.D., *Obiit* 1872.

**ELECTED.**

- 1847 \* SWETT, JOHN A., M.D., Orator 1853. *Obiit* 18th September, 1854, *æt.* 45.
- 1866 \* SWIFT, FOSTER, M.D., *Obiit* 10th May, 1875, *æt.* 41.
- 1876 SWIFT, SAMUEL, M.D., Yonkers, N. Y.
- Original. \* TAFT, MARCUS L., M.D., A. S. 1848. *Obiit* 8th February, 1850, *æt.* 29.
- 1872 TAUSZKY, RUDOLPH, M.D.
- 1867 TAYLOR, CHARLES F., M.D.
- Original. TAYLOR, ISAAC E., M.D., V. P. 1857 and 1858; Trust. 1864, 1872 to 1877, now in office.
- 1877 TAYLOR, JAMES R., M.D.
- 1862 TEATS, SYLVESTER, M.D.
- 1848 TELLKAMPF, THEODORE A., M.D.
- 1865 TELLER, SELIGMANN, M.D.
- 1847 \* THAYER, HENRY W., M.D., *Obiit* 21st May, 1857, *æt.* 50.
- 1859 \* THEBAUD, JULIUS S., M.D., *Obiit* 20th Oct. 1876, *æt.* 48.
- 1857 THOMAS, T. GAILLARD, M.D., R. S. 1858 to 1861; Orator 1877; V. P. 1879, now in office.
- 1869 \* THOMPSON, GEORGE, M.D., *Obiit* 13th January, 1877, *æt.* 37.
- 1864 THOMS, WM. F., M.D., Statistical Secretary 1868 to 1873.
- 1864 THOMSON, WILLIAM H., M.D., Orator 1878.
- 1867 \* TOWNSEND, JOHN F., M.D., *Obiit* 8th January, 1874, *æt.* 64.
- Original. \* TOWNSEND, PETER S., M.D., *Obiit* 26th March, 1849, *æt.* 54.
- 1857 TUCKER, CARLOS P., M.D.
- 1863 \* TUCKER, GEORGE H., M.D., *Obiit* 25th January, 1863, *æt.* 34.
- 1854 \* TUTTLE, JOHN T., M.D., *Obiit* 27th January, 1870, *æt.* 68.
- 1854 \* UHL, DAVID, M.D., *Obiit* 17th September, 1858, *æt.* 36.
- Original. \* UNDERHILL, ALFRED, M.D., V. P. 1863 to 1866; Trust. 1866 to 1873. *Obiit* 7th December, 1873, *æt.* 64.

## ELECTED.


- 1847 \* VACHÉ, ALEXANDER F., M.D., *Obiit* 9th June, 1857, *æt.* 57.
- Original. \* VAN ARSDALE, HENRY, M.D., Morristown, N. J., *Obiit* 25th January, 1864.
- Original. VAN ARSDALE, HENRY, M.D.
- 1847 \* VAN ARSDALE, PETER, M.D., *Obiit* 1858, *æt.* 77.
- Original. \* VAN BEUREN, THOMAS, M.D., *Obiit* 1848.
- 1856 \* VAN BUREN, PETER, M.D., *Obiit* 5th Dec. 1873, *æt.* 71.
- Original. VAN BUREN, WILLIAM H., M.D., LL.D., V. P. 1858.
- 1859 VAN DOREN, MATTHEW D., M.D.
- 1879 VAN HOUTEN, JACOB A., M.D.
- Original. \* VAN KLEEK, JOHN R., M.D., Trust. 1861 to 1866. *Obiit* 2d January, 1876, *æt.* 66.
- 1847 VAN PELT, MOSES D., M.D., V. P. 1860 to 1863, Trust. 1864 to 1869.
- 1879 VAN SANTVOORD, RICHARD, M.D.
- 1847 VAN WINKLE, EDWARD H., M.D.
- 1847 VANDERPOEL, EDWARD, M.D.
- 1859 \* VANDERVEER, JACOB H., M.D., *Obiit* 20th August, 1873, *æt.* 55.
- Original. VANDERVOORT, JOHN L., M.D., R. S. 1849.
- 1847 VARICK, THEODORE R., M.D., Jersey City, N. J.
- 1862 \* VEDDER, JOSEPH H., M.D., *Obiit* 18th July, 1864, *æt.* 33.
- 1854 \* VON ROTH, WOLDEMAR, M.D., *Obiit* 1857.
- 1876 WAGNER, CLINTON, M.D.
- 1873 WARD, EDWIN F., M.D.; A.S. 1877 to 1879; R.S. 1880, now in office.
- 1853 WARNER, EVERARDUS B., M.D.
- 1879 WARNER, JOHN W., M.D.
- Original. \* WASHINGTON, JAMES A., M.D., *Obiit* 30th August, 1847, *æt.* 45.
- 1853 \* WATSON, JOHN, M.D., Orator 1855 and 1860; V. P. 1856; P. 1859 and 1860. *Obiit* 3d June, 1863, *æt.* 56.
- Original. \* WATTS, ROBERT, JR., M.D., T. 1847. *Obiit* 8th Sept. 1867, *æt.* 55.

ELECTED.

- 1876 WEBB, Z. SWIFT, M.D.
- 1867 WEBER, LEONARD, M.D.
- 1879 WEBSTER, DAVID, M.D.
- Original. \* WEEKS, CYRUS, M.D. *Obiit* 20th Sept. 1875, *æt.* 68.
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- Original. \* WOOD, ISAAC, M.D., V. P. 1849; P. 1850 and 1853; Trust. 1851 to 1852, and 1859 to 1863. *Obiit* 25th March, 1868, *æt.* 74.
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 \* LEWIS, WILLIAM B., M.D., *Obiit* 16th June, 1874, *æt.* 32.  
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- \* SANDS, AUSTIN L., M.D., Newport, R. I., *Obit* 20th Dec., 1877, *æt.* 52.  
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1879 DUBOIS, ABRAM, M.D., New York City.  
1859 \* GIBSON, WILLIAM, M.D., Professor of the Principles and Practice of Surgery in the University of Pennsylvania, Philadelphia, Pa., *Obit* 2d March, 1868, *æt.* 80.  
1876 GROSS, SAMUEL D., M.D., LL.D., D.C.L. Oxon., Professor of Surgery in Jefferson Medical College, Philadelphia, Pa.  
1857 \* IVES, ELI, M.D., Professor of Materia Medica and Botany in Yale College, New Haven, Conn., *Obit* 8th October, 1861, *æt.* 82.



**ELECTED.**

- 1860 \* JACSON, JAMES, M.D., Professor Emeritus of the Practice of Physic in Harvard University, Cambridge, Mass., *Obiit* 27th August, 1867, *æt.* 90.
- 1859 \* LA ROCHE, RENE, M.D., Member of the American Philosophical Society, Philadelphia, Pa., *Obiit* 9th December, 1872, *æt.* 77.
- 1859 \* MUSSEY, REUBEN D., M.D., Professor of Surgery in the Medical College of Ohio, Cincinnati, O., *Obiit* 21st June, 1866, *æt.* 86.
- 1857 \* SPAULDING, MATHIAS, M.D., of Amherst, Mass., *Obiit* 22d May, 1865, *æt.* 95.
- 1871 STILLÉ, ALFRED, M.D., Professor of Clinical Medicine in the University of Pennsylvania, Philadelphia, Pa.
- 1874 VANDERPOEL, S. OAKLEY, M.D., Professor of Theory and Practice of Clinical Medicine in Albany Medical College, Albany, N. Y.; Health Officer of the Port of New York.
- 1878 WHITE, JAMES PLATT, M.D., Professor of Obstetrics and Diseases of Women and Children in University of Buffalo, N. Y.
- 1871 \* WOOD, GEORGE B., M.D., LL.D., Professor Emeritus of the Theory and Practice of Medicine in the University of Pennsylvania, Philadelphia, Pa., *Obiit* 30th March, 1879, *æt.* 81.

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- 1873 ACLAND, HENRY W., M.D., F.R.S., Regius Professor of Medicine in the University of Oxford, England.
- 1856 \* ADAMS, FRANCIS, M.D., LL.D., Surgeon, Banachory, Scotland. *Obiit* 26th February, 1861, *æt.* 66.
- 1847 \* AGASSIZ, LOUIS JOHN R., M.D., F.R.S., Professor of Natural History in Harvard University, Cambridge, Mass. *Obiit* 14th December, 1873, *æt.* 66.

## ELECTED.

- 1850 \* AMUSSAT, JEAN ZUILME, M.D., Member of the Royal Academy of Medicine, Paris, France. *Obiit* 12th May, 1856, *æt.* 58.
- 1854 \* ANDREAL, GABRIEL, M.D., Professor of Pathology in the Faculty of Medicine, Paris, France. *Obiit* 13th February, 1876, *æt.* 78.
- 1854 BARTHEZ, ERNST, M.D., Paris, France.
- 1847 \* BECK, THEODRICK ROMEYN, M.D., LL.D., Professor of Medical Jurisprudence in Albany Medical College. *Obiit* 19th November, 1855, *æt.* 64.
- 1857 \* BENNETT, JOHN HUGHES, M.D., Professor of Medicine in the University of Edinburgh, Scotland. *Obiit* 25th September, 1875, *æt.* 63.
- 1854 \* BIGELOW, JACOB, M.D., LL.D., Professor of Materia Medica in Harvard University, Cambridge, Mass. *Obiit* 10th January, 1879, *æt.* 91.
- 1847 \* BLATCHFORD, THOMAS W., M.D., Troy, N. Y., *Obiit* 7th January, 1866, *æt.* 71.
- 1867 BROWN-SÉQUARD, C. E., M.D., Paris, France.
- 1849 \* BUREAUD-RIOFREY, A. M., M.D.
- 1871 CHAMBERS, THOMAS K., M.D., Physician to and Lecturer on Medicine at St. Mary's Hospital, London.
- 1847 \* CIVIALE, JEAN, M.D., Honorary Member of the Academy of Medicine, Paris, France. *Obiit* 13th June, 1867, *æt.* 75.
- 1866 CUNHA, JOSÉ DE, M.D., Rio Janeiro, Brazil.
- 1868 DAVIS, NATHAN S., M.D., Professor of the Principles and Practice of Medicine in Chicago Medical College.
- 1872 DICHIARA, FRANCESCO, M.D., Palermo, Italy.
- 1850 \* DICKSON, SAMUEL H., M.D., Professor of the Institutes of Medicine in South Carolina Medical College. *Obiit* 31st March, 1872, *æt.* 74.
- 1871 DICKINSON, WILLIAM H., M.D., Physician to and Lecturer on Pathology at St. George's Hospital, London, England.
1854. \* DUBOIS, BARON PAUL, Dean and Professor of Clinical Midwifery in the Faculty of Medicine of Paris, France. *Obiit* 29th November, 1871, *æt.* 76.

## ELECTED.

- 1867 DUMONT, HENRI, M.D., Havana, Cuba.
- 1848 DUPIERRIS, MARTIAL, M.D., Paris, France.
- 1876 ERICHSEN, JOHN ERIC, F.R.S., late Professor of Surgery in University College, London, England.
- 1850 \* FENNER, ERASMUS D., M.D., Professor of the Theory and Practice of Medicine in New Orleans School of Medicine. *Obiit* 4th May, 1866, *æt.* 59.
- 1849 \* FERGUSON, Sir WILLIAM, F.R.S., Surgeon to King's College Hospital, London, England. *Obiit* 10th February, 1877, *æt.* 69.
- 1877 GALLARD, T., M.D., Paris, France.
- 1879 GOODELL, WILLIAM, M.D., Professor of Clinical Gynæcology in the University of Pennsylvania.
- 1851 GROSS, SAMUEL D., M.D., late Professor of Surgery in the Medical Department of Louisville University, Louisville, Ky.
- 1855 \* GUGGENBUHL, JEAN L., M.D., Abendberg, Switzerland. *Obiit* February, 1863.
- 1847 \* HARRIS, THOMAS, M.D., Surgeon-General U. S. Navy, Washington, D. C. *Obiit* 4th March, 1862, *æt.*
- 1848 \* HOLLAND, Sir HENRY, Bart., M.D., D.C.L., LL.D., F.R.S., Physician to H. M. the Queen, London, England. *Obiit* 29th October, 1873, *æt.* 85.
- 1850 \* HOOKER, WORTHINGTON, M.D., Professor of the Theory and Practice of Medicine in Yale College, New Haven, Conn. *Obiit* 6th November, 1867, *æt.* 61.
- 1874 JENNER, Sir WILLIAM, Bart., M.D., D.C.L., F.R.S., Professor of Clinical Medicine in University College, London, England.
- 1852 \* LEROY (D'ETIOLLES), JEAN J. J., M.D., Paris, France. *Obiit* July, 1860, *æt.* 62.
- 1879 LITTLE, WILLIAM J., M.R.C.P., M.R.C.S., London, England.
- 1871 \* NÉLATON, AUGUSTE, Professor of Clinical Surgery in the University of Paris, France. *Obiit* 20th September, 1873, *æt.* 65.
- 1880 MARSH, ELIAS J., M.D., Paterson, N. J.
- 1877 MERCIER, L. AUGUSTE, M.D., Paris, France.

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- 1874 MITCHELL, S. WEIR, M.D., Philadelphia.
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- 1874 PAGET, Sir JAMES, Bart., D.C.L., LL.D., F.R.S., Consulting Surgeon to St. Bartholomew's Hospital, London, England.
- 1857 \* PEASLEE, EDMUND R., M.D., Professor of Surgery in Dartmouth Medical College, Hanover, N. H. *Obiit* 22d January, 1878, *æt.* 63.
- 1853 PRINCE VIROMMA LUANG SI TIRAT SANIK, Siam.
- 1868 POST, GEORGE E., M.D., Beirut, Syria.
- 1874 REGO, JOSÉ PEREIRA, FILHO, M.D., Rio Janeiro, Brazil.
- 1850 REYNOLDS, EDWARD, M.D., Boston, Mass.
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- 1849 \* ROGET, PETER MARK, M.D., F.R.S., Professor of Physiology in the Royal Institution of Great Britain, London. *Obiit* 12th September, 1869, *æt.* 90.
- 1871 \* ROKITANSKY, CARL, M.D., Professor of Pathology in the University of Vienna. *Obiit* 23d July, 1878, *æt.* 74.
- 1856 \* SIMPSON, JAMES Y., M.D., Professor of Midwifery in the University of Edinburgh, Scotland. *Obiit* 8th May, 1870, *æt.* 59.
- 1848 SMITH, ASHBEL, M.D., Texas.
- 1874 STEWART, F. CAMPBELL, M.D., Florence, Italy.
- 1878 THOMPSON, Sir HENRY, F.R.C.S., Emeritus Professor of Clinical Surgery in University College, London, England.
- 1872 TILT, EDWARD J., M.D., Consulting Physician to the Farringdon General Dispensary, London, England.
- 1852 TOWNSEND, JAMES C., M.D., Glen Cove, N. Y.
- 1852 \* VELPEAU, ALFRED A. L. M., Professor of Clinical Surgery in the Faculty of Medicine of Paris, Surgeon to the Hôpital de la Charité, Paris. *Obiit* 23d August, 1867, *æt.* 72.

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- 1871 VIRCHOW, RUDOLPH, M.D., Professor of Pathological Anatomy in the University of Berlin.
- 1869 VOSS, LOTHAR H., M.D., Berleberg, Prussia.
- 1874 WHITE, JAMES P., M.D., Professor of Obstetrics and the Diseases of Women and Children in the Medical Department of the University of Buffalo, N. Y.
- 1857 \* WING, JOEL A., M.D., late President New York State Medical Society, Albany, N.Y. *Obit* 6th September, 1852, *æt.* 64.
- 1867 WORTABET, JOHN, M.D., Beirut, Syria.

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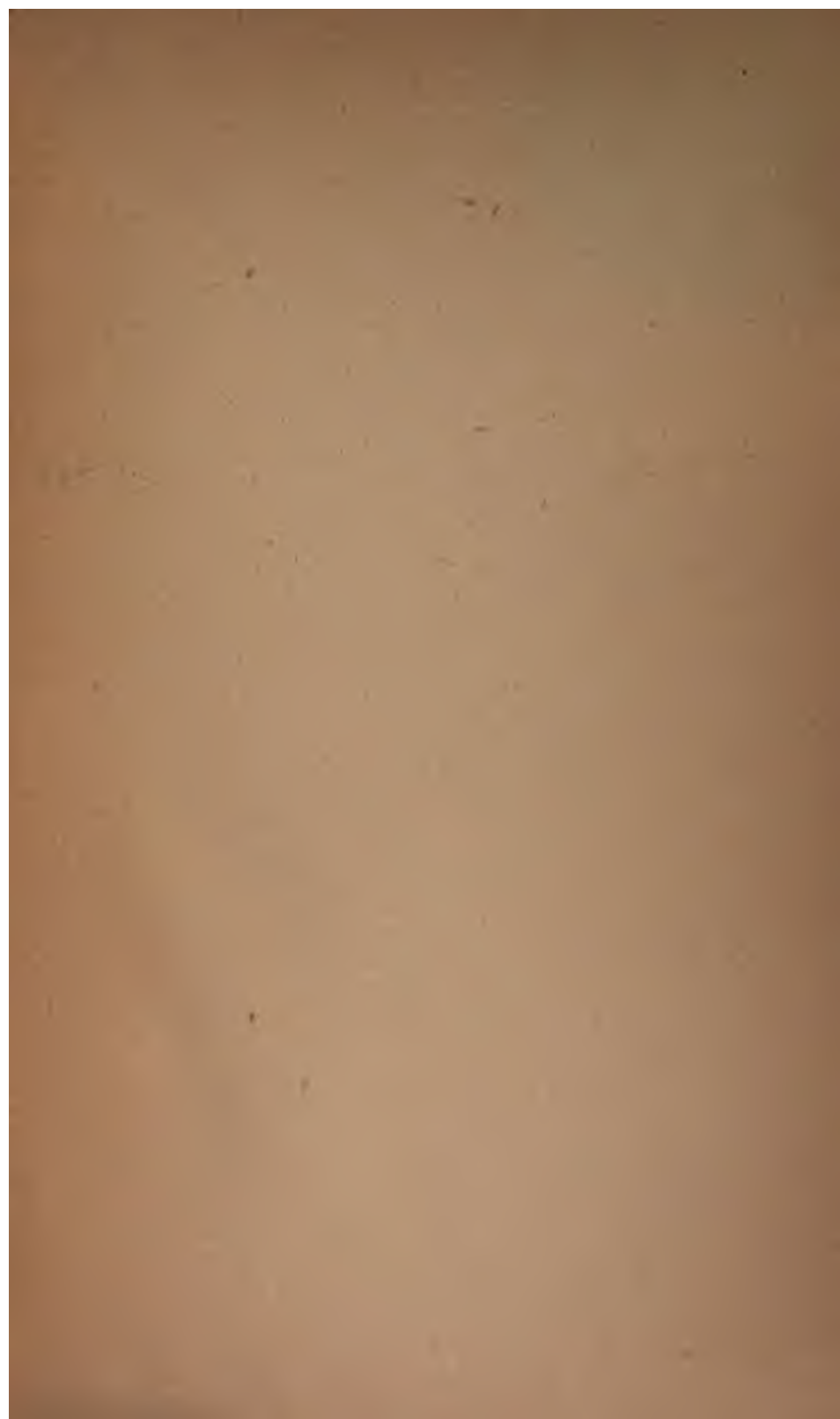


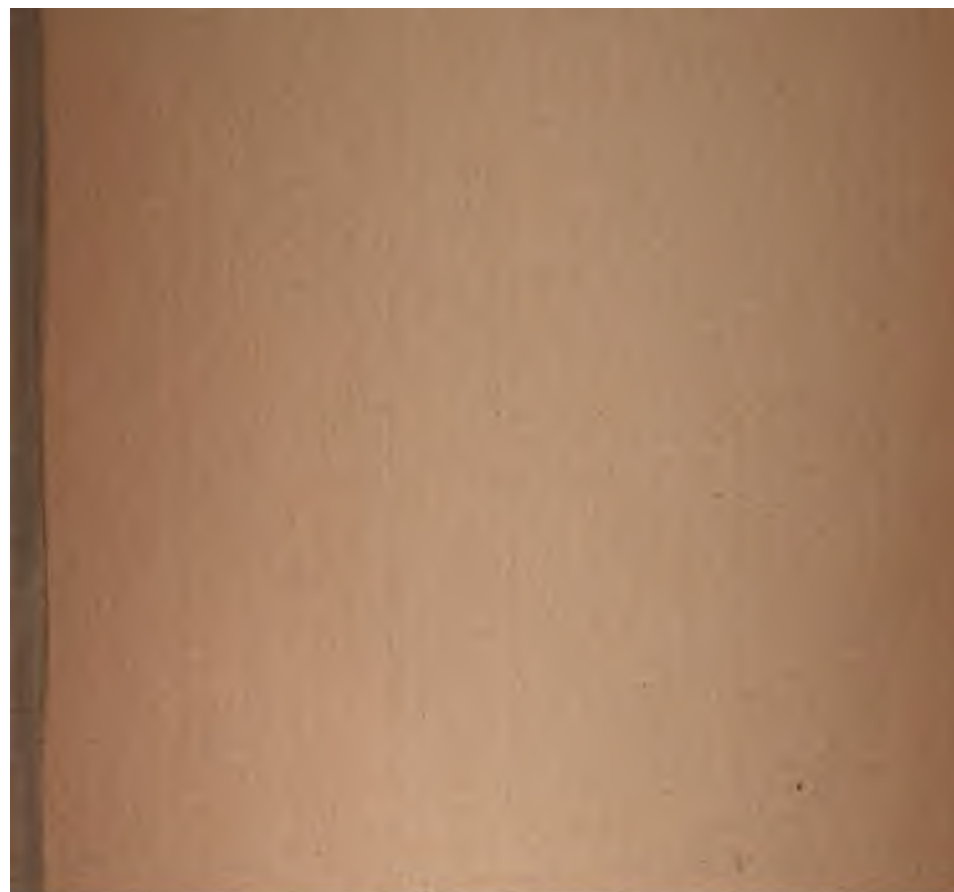
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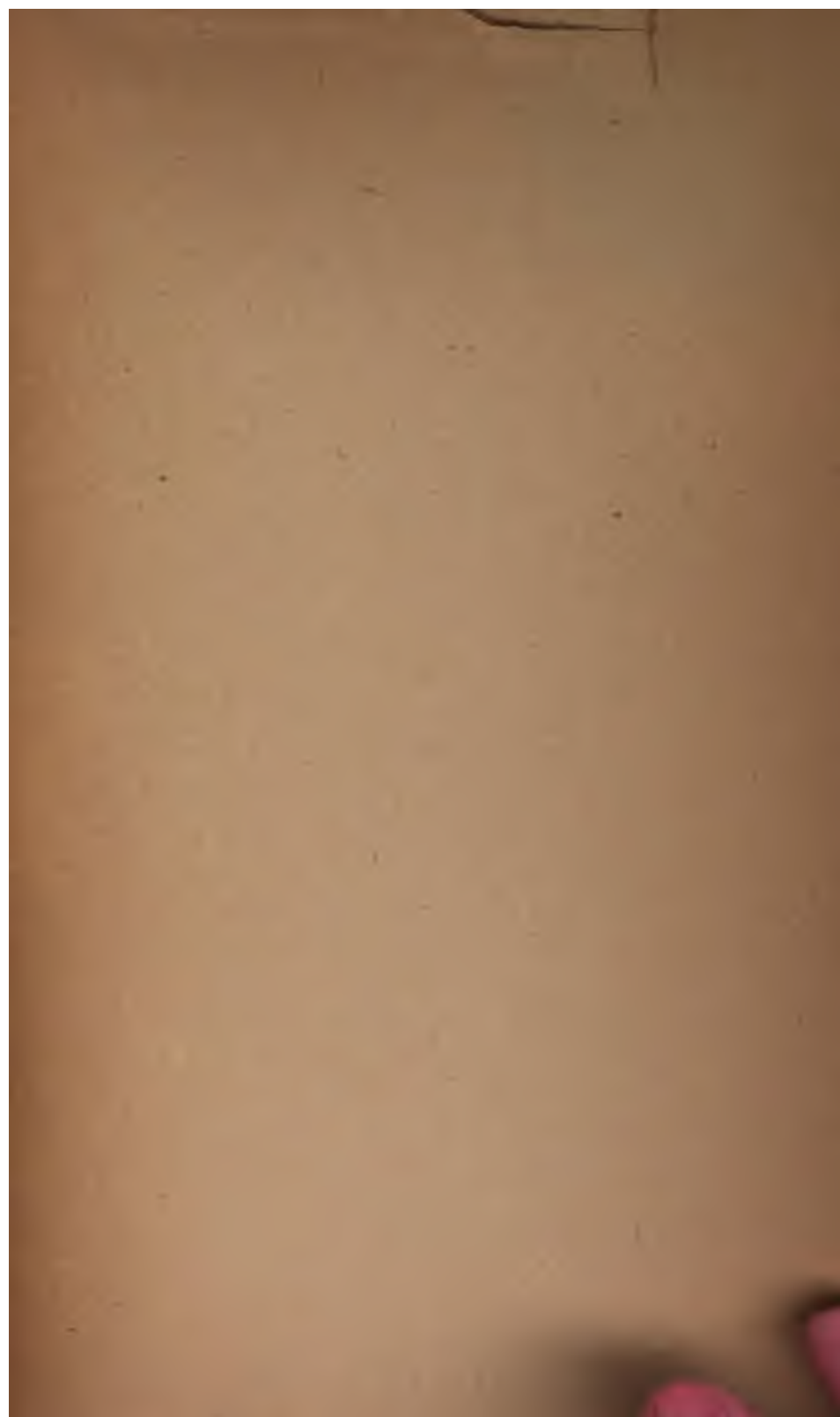
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